

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 195

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) MIKE GRAVEL FOR PRESIDENT 2008		2. IDENTIFICATION NUMBER C00423202	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1600 N OAK ST #1412			
CITY, STATE, and ZIP CODE ARLINGTON VA 22209		3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General	

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year End Report

Monthly Report Due On:

☐ February 20
☐ March 20
☐ April 20
☐ May 20

☐ June 20
☐ July 20
☐ August 20
☐ September 20

☐ October 20
☐ November 20
☐ December 20
☐ January 31

☐ Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD	FROM 10/01/2007	THROUGH 12/31/2007
SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) 8. SUBTOTAL (Lines 6 and 7) 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) 13. EXPENDITURES SUBJECT TO LIMITATION	26188.42 131685.47 157873.89 161861.04 -3987.15 0.00 123188.73 487047.25
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	435351.60 487047.25

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer MIKE GRAVEL	Date 02/17/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**2 / 195**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

MIKE GRAVEL FOR PRESIDENT 2008

Report Covering the Period

From: 10/01/2007

To: 12/31/2007

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	131685.47	434850.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	501.60
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		131685.47	435351.60
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	73515.73
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	73515.73
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	92.77
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	131685.47	508960.10
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	151861.04	487047.25
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	10000.00	25900.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	10000.00	25900.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	161861.04	512947.25
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 195
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

MIKE GRAVEL FOR PRESIDENT 2008

ADDRESS (number and street)

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

2. IDENTIFICATION NUMBER

C00423202

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	10454.40
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	10454.40

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Gole Abhijeet

Mailing Address

1462 Rose Garden Ln null null

City

Cupertino

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.Name of Employer
Marvell Semiconductor

Occupation

Software Director

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

287.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16691

B.

Full Name (Last, First, Middle Initial)

movahedi afsaneh

Mailing Address

36 Blue Heron Way

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.Name of Employer
none

Occupation

mother/home

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15320

C.

Full Name (Last, First, Middle Initial)

WILSON ALETTA

Mailing Address

P.O. BOX 1088

City

MESILLA PARK

State

NM

Zip Code

88047

FEC ID number of contributing
federal political committee.Name of Employer
NONE

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14131

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing
federal political committee.

Name of Employer
NA

Occupation

Na

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15574

B.

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing
federal political committee.

Name of Employer
NA

Occupation

Na

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15782

C.

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing
federal political committee.

Name of Employer
NA

Occupation

Na

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.15947

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 195

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Mayhut Alysia	Date of Receipt
Mailing Address 414 Old Dam Road	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 7</div> </div>
City State Zip Code Selma NC 27576	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee.	CONTRIBUTION
Name of Employer NA	Occupation Na
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 305.00
Transaction ID: SA17A.16039	
B. Full Name (Last, First, Middle Initial) Mayhut Alysia	Date of Receipt
Mailing Address 414 Old Dam Road	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 7</div> </div>
City State Zip Code Selma NC 27576	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee.	CONTRIBUTION
Name of Employer NA	Occupation Na
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 330.00
Transaction ID: SA17A.16305	
C. Full Name (Last, First, Middle Initial) Mayhut Alysia	Date of Receipt
Mailing Address 414 Old Dam Road	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City State Zip Code Selma NC 27576	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee.	CONTRIBUTION
Name of Employer NA	Occupation Na
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 430.00
Transaction ID: SA17A.16457	

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing
federal political committee.

Name of Employer
NA

Occupation
Na

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16610

B.

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing
federal political committee.

Name of Employer
NA

Occupation
Na

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16641

C.

Full Name (Last, First, Middle Initial)

Yadav Anant

Mailing Address

1423 S. Campus Pkwy

City

Chicago

State

IL

Zip Code

60608

FEC ID number of contributing
federal political committee.

Name of Employer
St Margaret Mercy Healthc-
are Centers

Occupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14782

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Yadav Anant Mailing Address 1423 S. Campus Pkwy City State Zip Code Chicago IL 60608 FEC ID number of contributing federal political committee. Name of Employer St Margaret Mercy Healthc-are Centers Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Physician Election Cycle-to-Date ▼ 286.15	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 0 7 Amount of Each Receipt this Period 36.15 CONTRIBUTION Transaction ID: SA17A.14857
B. Full Name (Last, First, Middle Initial) Bardwell Andy Mailing Address 4801 W. Yale Ave. City State Zip Code Denver CO 80219 FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Consultant Election Cycle-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Amount of Each Receipt this Period 1000.00 CONTRIBUTION Transaction ID: SA17A.14475
C. Full Name (Last, First, Middle Initial) Donaldson Ann Mailing Address 4421 Eastwood Rd. City State Zip Code Minnetonka MN 55345 FEC ID number of contributing federal political committee. Name of Employer None Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Unemployed Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.13581

SUBTOTAL of Receipts This Page (optional)

1286.15

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

BECK ANNA

Mailing Address

26358 CARMEL RANCHO LANE STE 2

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14330

B.

Full Name (Last, First, Middle Initial)

Grambihler Anton

Mailing Address

2008 Davison Ave

City

Richland

State

WA

Zip Code

99354

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13556

C.

Full Name (Last, First, Middle Initial)

Grambihler Anton

Mailing Address

2008 Davison Ave

City

Richland

State

WA

Zip Code

99354

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13653

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.14358

B.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.14838

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13654

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15003

B.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13717

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15539

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
RetiredOccupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13839

B.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
RetiredOccupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

975.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16090

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
RetiredOccupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1035.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Transaction ID: SA17A.16298

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1135.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16396

B.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

65.00

CONTRIBUTION

Transaction ID: SA17A.13989

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16659

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16827

B.

Full Name (Last, First, Middle Initial)

Sher Austin

Mailing Address

660 Washington St. - Apt. 4i

City

Boston

State

MA

Zip Code

02111

FEC ID number of contributing
federal political committee.Name of Employer
n/a

Occupation

n/a

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.16347

C.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing
federal political committee.Name of Employer
none

Occupation

none

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16571

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
none

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16594

B.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
none

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16702

C.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
none

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16737

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
none

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Transaction ID: SA17A.16772

B.

Full Name (Last, First, Middle Initial)

Luther Brenda

Mailing Address

PO Box 1913

City

El Granada

State

CA

Zip Code

94018

FEC ID number of contributing
federal political committee.Name of Employer
selfOccupation
Transformational Coach

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	0	7

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Transaction ID: SA17A.15779

C.

Full Name (Last, First, Middle Initial)

Thomerson Brenda

Mailing Address

205 Sabeta Ave

PO Box 445

City

Poncha Springs

State

CO

Zip Code

81242

FEC ID number of contributing
federal political committee.Name of Employer
Hair's to YouOccupation
Cosmetologist

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14028

SUBTOTAL of Receipts This Page (optional)

1260.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Borncamp Brian

Mailing Address

301 Highgate Ave

City

Buffalo

State

NY

Zip Code

14215

FEC ID number of contributing
federal political committee.

Name of Employer
BNAC

Occupation
IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Amount of Each Receipt this Period

109.00

CONTRIBUTION

Transaction ID: SA17A.16861

B.

Full Name (Last, First, Middle Initial)

Ladd Brian

Mailing Address

337 Chris Common #108

City

Livermore

State

CA

Zip Code

94550

FEC ID number of contributing
federal political committee.

Name of Employer
Pleasanton Unified School
District

Occupation
Teacher

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14628

C.

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing
federal political committee.

Name of Employer
Palos Community Hospital

Occupation
IT Support

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.14730

SUBTOTAL of Receipts This Page (optional)

259.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing
federal political committee.

Name of Employer
Palos Community Hospital

Occupation
IT Support

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15646

B.

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing
federal political committee.

Name of Employer
Palos Community Hospital

Occupation
IT Support

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15724

C.

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing
federal political committee.

Name of Employer
Palos Community Hospital

Occupation
IT Support

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16497

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

retired city manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15192

B.

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

retired city manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15965

C.

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

retired city manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16366

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Mullen Carol

Mailing Address

618 Tennyson Avenue

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
investors

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16044

B.

Full Name (Last, First, Middle Initial)

Mullen Carol

Mailing Address

618 Tennyson Avenue

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
investors

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16804

C.

Full Name (Last, First, Middle Initial)

Sikorra Chad

Mailing Address

1600 Swartz Dr

Apt 23

City

Waukesha

State

WI

Zip Code

53188

FEC ID number of contributing
federal political committee.Name of Employer
Goodwill Industries of So-
utheastern WIOccupation
PC Support Specialist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16453

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Sikorra Chad	Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>1 2 / 2 5 / 2 0 0 7</div> </div>
Mailing Address 1600 Swartz Dr Apt 23	
City State Zip Code Waukesha WI 53188	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 50.00
Name of Employer Goodwill Industries of Southeastern WI Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation PC Support Specialist Election Cycle-to-Date ▼ <div> <div></div> <div>325.00</div> </div> CONTRIBUTION Transaction ID: SA17A.16760
B. Full Name (Last, First, Middle Initial) Kinsey Charles	Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 7</div> </div>
Mailing Address 3105 Nantucket Ct.	
City State Zip Code Pearland TX 77584	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 250.00
Name of Employer self Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation lawyer Election Cycle-to-Date ▼ <div> <div></div> <div>250.00</div> </div> CONTRIBUTION Transaction ID: SA17A.15519
C. Full Name (Last, First, Middle Initial) rizzo charles	Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>1 0 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 1240 n homan ave.	
City State Zip Code chicago IL 60651	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 500.00
Name of Employer skyline design Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation president Election Cycle-to-Date ▼ <div> <div></div> <div>500.00</div> </div> CONTRIBUTION Transaction ID: SA17A.14407

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Thompson Charles

Mailing Address

805 Connors Drive

City

Newport News

State

VA

Zip Code

23608

FEC ID number of contributing
federal political committee.Name of Employer
Management ConsultingOccupation
Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16721

B.

Full Name (Last, First, Middle Initial)

Herrera Christian

Mailing Address

576 W. 21st Street

City

San Pedro

State

CA

Zip Code

90731

FEC ID number of contributing
federal political committee.Name of Employer
Los Angeles Unified School
DistrictOccupation
Teacher

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16456

C.

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13678

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Benacci Christina Mailing Address 2202 Gunter Bay City State Zip Code San Antonio TX 78245 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Lawyer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 750.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7 Amount of Each Receipt this Period 100.00 CONTRIBUTION Transaction ID: SA17A.13741
B. Full Name (Last, First, Middle Initial) Benacci Christina Mailing Address 2202 Gunter Bay City State Zip Code San Antonio TX 78245 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Lawyer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 850.00	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7 Amount of Each Receipt this Period 100.00 CONTRIBUTION Transaction ID: SA17A.13848
C. Full Name (Last, First, Middle Initial) Benacci Christina Mailing Address 2202 Gunter Bay City State Zip Code San Antonio TX 78245 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Lawyer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1008.44	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7 Amount of Each Receipt this Period 158.44 CONTRIBUTION Transaction ID: SA17A.13849

SUBTOTAL of Receipts This Page (optional)

358.44

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation

Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1058.44

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13930

B.

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation

Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1108.44

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.14010

C.

Full Name (Last, First, Middle Initial)

MORRIL CHRISTOPHER

Mailing Address

862 SIR FRANIS DRAKE BLVD #268

City

SAN ANSELMO

State

CA

Zip Code

94960

FEC ID number of contributing
federal political committee.

Name of Employer
NONE

Occupation

NONE

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14295

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Ayuen Clement

Mailing Address

3010 W. 4th Street

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing
federal political committee.

Name of Employer
BNY Mellon

Occupation

Client Technology Consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16274

B.

Full Name (Last, First, Middle Initial)

DeGross Dale

Mailing Address

841 Harrison Street

City

West Hempstead

State

NY

Zip Code

11552

FEC ID number of contributing
federal political committee.

Name of Employer
self

Occupation

Hospitality consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14399

C.

Full Name (Last, First, Middle Initial)

Molnar Daniel

Mailing Address

27705 NE 1 st St

City

Redmond

State

WA

Zip Code

98053

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation

None

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16679

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Shea, O.D. Daniel

Mailing Address

3515 Bayview Ct.

City

Wichita

State

KS

Zip Code

67204

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
Optometrist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14648

B.

Full Name (Last, First, Middle Initial)

Bryan David

Mailing Address

5939 e 32nd st

City

tucson

State

AZ

Zip Code

85711

FEC ID number of contributing
federal political committee.Name of Employer
retiredOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13868

C.

Full Name (Last, First, Middle Initial)

Bryan David

Mailing Address

5939 e 32nd st

City

tucson

State

AZ

Zip Code

85711

FEC ID number of contributing
federal political committee.Name of Employer
retiredOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

252.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13986

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Chard David

Mailing Address

8005 NE HUNT CLUB LN

City

Hansville

State

WA

Zip Code

98340

FEC ID number of contributing
federal political committee.Name of Employer
CCGOccupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.13767

B.

Full Name (Last, First, Middle Initial)

Hutchins David

Mailing Address

6526 SE 39th Ave.

City

portland

State

OR

Zip Code

97202

FEC ID number of contributing
federal political committee.Name of Employer
self/EmployedOccupation
leathercrafter

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15167

C.

Full Name (Last, First, Middle Initial)

Jenkins David

Mailing Address

4 Angevine Rd

City

Warren

State

CT

Zip Code

06754

FEC ID number of contributing
federal political committee.Name of Employer
first new york securities
INCOccupation
programmer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14861

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

king david

Mailing Address

5121 se 30th ave. #130 5121 se 30t

City

portland

State

OR

Zip Code

97202

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Amount of Each Receipt this Period

209.40

CONTRIBUTION

Transaction ID: SA17A.14786

B.

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing
federal political committee.Name of Employer
BridgePort NetworksOccupation
Software Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13747

C.

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing
federal political committee.Name of Employer
BridgePort NetworksOccupation
Software Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.15725

SUBTOTAL of Receipts This Page (optional)

359.40

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing
federal political committee.Name of Employer
BridgePort Networks

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16400

B.

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing
federal political committee.Name of Employer
BridgePort Networks

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16697

C.

Full Name (Last, First, Middle Initial)

Oyog David

Mailing Address

2437 W Monterey Ave

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing
federal political committee.Name of Employer
AT&T

Occupation

operator

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13691

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.	Full Name (Last, First, Middle Initial) Oyog David	Date of Receipt																				
	Mailing Address 2437 W Monterey Ave	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	2		2	0	0	7													
	City State Zip Code Stockton CA 95204	Amount of Each Receipt this Period																				
	FEC ID number of contributing federal political committee.	<table border="1"><tr><td colspan="10">100.00</td></tr></table>	100.00																			
100.00																						
	Name of Employer AT&T	CONTRIBUTION																				
	Occupation operator																					
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼																				
	<input type="checkbox"/> Other (specify) ▼	<table border="1"><tr><td colspan="10">400.00</td></tr></table>	400.00																			
400.00																						
		Transaction ID: SA17A.13990																				
B.	Full Name (Last, First, Middle Initial) Oyog David	Date of Receipt																				
	Mailing Address 2437 W Monterey Ave	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	7		2	0	0	7													
	City State Zip Code Stockton CA 95204	Amount of Each Receipt this Period																				
	FEC ID number of contributing federal political committee.	<table border="1"><tr><td colspan="10">100.00</td></tr></table>	100.00																			
100.00																						
	Name of Employer AT&T	CONTRIBUTION																				
	Occupation operator																					
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼																				
	<input type="checkbox"/> Other (specify) ▼	<table border="1"><tr><td colspan="10">500.00</td></tr></table>	500.00																			
500.00																						
		Transaction ID: SA17A.14011																				
C.	Full Name (Last, First, Middle Initial) Shapiro Desmond	Date of Receipt																				
	Mailing Address 2572 Grace Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		1	6		2	0	0	7													
	City State Zip Code Santa Rosa CA 95404	Amount of Each Receipt this Period																				
	FEC ID number of contributing federal political committee.	<table border="1"><tr><td colspan="10">250.00</td></tr></table>	250.00																			
250.00																						
	Name of Employer self	CONTRIBUTION																				
	Occupation physician																					
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼																				
	<input type="checkbox"/> Other (specify) ▼	<table border="1"><tr><td colspan="10">250.00</td></tr></table>	250.00																			
250.00																						
		Transaction ID: SA17A.16013																				

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

McCullough Devon

Mailing Address

7015 Churchill Road

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.Name of Employer
Network Guild

Occupation

computer hacker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

324.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	7

Amount of Each Receipt this Period

320.00

CONTRIBUTION

Transaction ID: SA17A.16112

B.

Full Name (Last, First, Middle Initial)

Shuntich Dianne

Mailing Address

109 Eastern Hills Drive

City

Richmond

State

KY

Zip Code

40475

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

retired

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13668

C.

Full Name (Last, First, Middle Initial)

Adams Donna

Mailing Address

2454B Westcliffe Ln.

City

Walnut Creek

State

CA

Zip Code

94597

FEC ID number of contributing
federal political committee.Name of Employer
Caregiver/Goldsmith

Occupation

Self

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

449.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13527

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Jones Duke

Mailing Address

2328 Channing Way

City

Berkeley

State

CA

Zip Code

94704

FEC ID number of contributing
federal political committee.

Name of Employer
Ecast, Inc.

Occupation

Web Developer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

499.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

72.00

CONTRIBUTION

Transaction ID: SA17A.13563

B.

Full Name (Last, First, Middle Initial)

Jones Duke

Mailing Address

2328 Channing Way

City

Berkeley

State

CA

Zip Code

94704

FEC ID number of contributing
federal political committee.

Name of Employer
Ecast, Inc.

Occupation

Web Developer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15613

C.

Full Name (Last, First, Middle Initial)

Jones Duke

Mailing Address

2328 Channing Way

City

Berkeley

State

CA

Zip Code

94704

FEC ID number of contributing
federal political committee.

Name of Employer
Ecast, Inc.

Occupation

Web Developer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

599.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16394

SUBTOTAL of Receipts This Page (optional)

172.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Skriloff Dylan

Mailing Address

13 Heights Road

City

State

Zip Code

Stony Point

NY

10980

FEC ID number of contributing
federal political committee.Name of Employer
Southern Dutchess NewsOccupation
Journalist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	7

Amount of Each Receipt this Period

125.00

CONTRIBUTION

Transaction ID: SA17A.15785

B.

Full Name (Last, First, Middle Initial)

Skriloff Dylan

Mailing Address

13 Heights Road

City

State

Zip Code

Stony Point

NY

10980

FEC ID number of contributing
federal political committee.Name of Employer
Southern Dutchess NewsOccupation
Journalist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Transaction ID: SA17A.16287

C.

Full Name (Last, First, Middle Initial)

Skriloff Dylan

Mailing Address

13 Heights Road

City

State

Zip Code

Stony Point

NY

10980

FEC ID number of contributing
federal political committee.Name of Employer
Southern Dutchess NewsOccupation
Journalist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16673

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 195

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) McJunkin E. A. Mailing Address 541 Rock Forge Loop City State Zip Code Angels Camp CA 95222 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Engineer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.15425
B. Full Name (Last, First, Middle Initial) Simmonds Elizabeth Mailing Address 81 Daisy Springs Ct City State Zip Code Las Vegas NV 89148 FEC ID number of contributing federal political committee. Name of Employer Vin Sauvage Occupation Wine Sales Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.14567
C. Full Name (Last, First, Middle Initial) KORNSAND ELLIOT Mailing Address P.O. BOX 16640 City State Zip Code SAN JUAN PR 00908 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 7 Amount of Each Receipt this Period 300.00 CONTRIBUTION Transaction ID: SA17A.14333

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Jacobson Elliott

Mailing Address

1001 3rd Street, SW

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing
federal political committee.Name of Employer
Self-Employed

Occupation

Writer/Political Cons.

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14696

B.

Full Name (Last, First, Middle Initial)

FRANKLIN ESTHER

Mailing Address

3980 MC KINLEY BLVD

City

SACRAMENTO

State

CA

Zip Code

95819

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	0	7

Amount of Each Receipt this Period

57.75

CONTRIBUTION

Transaction ID: SA17A.14968

C.

Full Name (Last, First, Middle Initial)

FRANKLIN ESTHER

Mailing Address

3980 MC KINLEY BLVD

City

SACRAMENTO

State

CA

Zip Code

95819

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

282.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16313

SUBTOTAL of Receipts This Page (optional)

357.75

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

jaleski eugene

Mailing Address

671 cedar street

City

longboat key

State

FL

Zip Code

34228

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

computer systems designer

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16335

B.

Full Name (Last, First, Middle Initial)

Clark Faisal

Mailing Address

615 Cole St. Apt#17

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Hands-On Mobile

Receipt For:

☐ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16869

C.

Full Name (Last, First, Middle Initial)

Long Frank

Mailing Address

POPB 398

City

El Granada

State

CA

Zip Code

94018

FEC ID number of contributing
federal political committee.Name of Employer
Self employed

Occupation

Health Food Store Owner

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15689

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

VANNAERSEN FREDERIK

Mailing Address

803 HIDDEN CREEK CT

City

CEDAR HILL

State

TX

Zip Code

75104

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
CPA

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14802

B.

Full Name (Last, First, Middle Initial)

fundaro gaetano

Mailing Address

40 brooline ave

City

middletown

State

NY

Zip Code

10940

FEC ID number of contributing
federal political committee.Name of Employer
NYPDOccupation
police officer

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14646

C.

Full Name (Last, First, Middle Initial)

fundaro gaetano

Mailing Address

40 brooline ave

City

middletown

State

NY

Zip Code

10940

FEC ID number of contributing
federal political committee.Name of Employer
NYPDOccupation
police officer

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16201

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Hansen Gary

Mailing Address

P.O.Box 868

City

Tiburon

State

CA

Zip Code

94920

FEC ID number of contributing
federal political committee.Name of Employer
Hansen and AssociatesOccupation
Architect

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

292.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Amount of Each Receipt this Period

292.00

CONTRIBUTION

Transaction ID: SA17A.16455

B.

Full Name (Last, First, Middle Initial)

Melling George

Mailing Address

3081 Whitewater Dr

City

Holladay

State

UT

Zip Code

84121

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
none

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14433

C.

Full Name (Last, First, Middle Initial)

Shimabuku George

Mailing Address

91825 Makaonaona St.

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing
federal political committee.Name of Employer
NoneOccupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15735

SUBTOTAL of Receipts This Page (optional)

592.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Shimabuku George

Mailing Address

91825 Makaonaona St.

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing
federal political committee.Name of Employer
None

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16722

B.

Full Name (Last, First, Middle Initial)

WRIGHT GEORGE

Mailing Address

3622 STONEGLEN S

City

RICHMOND

State

CA

Zip Code

94806

FEC ID number of contributing
federal political committee.Name of Employer
Social Security

Occupation

Disability Examiner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14511

C.

Full Name (Last, First, Middle Initial)

COSENZA GLENDA

Mailing Address

126 ILEHAMWOOD DRIVE

City

DEKALB

State

IL

Zip Code

60115

FEC ID number of contributing
federal political committee.Name of Employer
Northern Illinois Univ

Occupation

Professor of Music Education

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

45.00

CONTRIBUTION

Transaction ID: SA17A.15545

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
COSENZA GLENDA

Mailing Address
126 ILEHAMWOOD DRIVE

City State Zip Code
DEKALB IL 60115

FEC ID number of contributing
federal political committee.

Name of Employer
Northern Illinois Univ

Occupation
Professor of Music Education

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
495.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15676

B.

Full Name (Last, First, Middle Initial)
Kern Hall

Mailing Address
11 Brookmeade Ct.

City State Zip Code
Sterling VA 20165

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
retired

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14489

C.

Full Name (Last, First, Middle Initial)
Kern Hall

Mailing Address
11 Brookmeade Ct.

City State Zip Code
Sterling VA 20165

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
retired

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15564

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

RABIEE HAMID

Mailing Address

2787 EUREKA WAY

City

REDDING

State

CA

Zip Code

96001

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13757

B.

Full Name (Last, First, Middle Initial)

Berg Helge

Mailing Address

29601 David Lane

City

Newberg

State

OR

Zip Code

97132

FEC ID number of contributing
federal political committee.Name of Employer
selfOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

37.75

CONTRIBUTION

Transaction ID: SA17A.14453

C.

Full Name (Last, First, Middle Initial)

Lippes jack

Mailing Address

31b Hampton Hill Drive

City

Buffalo

State

NY

Zip Code

14221

FEC ID number of contributing
federal political committee.Name of Employer
Jack LippesOccupation
physician (ret)

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.14934

SUBTOTAL of Receipts This Page (optional)

587.75

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HURT JAMES

Mailing Address

P.O. BOX 322

City

SAVOY

State

IL

Zip Code

61874

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

55.00

CONTRIBUTION

Transaction ID: SA17A.14113

B.

Full Name (Last, First, Middle Initial)

Moore James

Mailing Address

PO Box 418

City

Walsenburg

State

CO

Zip Code

81089

FEC ID number of contributing
federal political committee.Name of Employer
Town of Aguilar

Occupation

Office Manager

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.14437

C.

Full Name (Last, First, Middle Initial)

Richardson James

Mailing Address

3614 Hillview Close

City

Montgomery

State

AL

Zip Code

36106

FEC ID number of contributing
federal political committee.Name of Employer
Richardson and Associates
Architects

Occupation

Architectural Assistant

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16666

SUBTOTAL of Receipts This Page (optional)

605.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Maunz Jamie

Mailing Address

130 Jackson St Apt 4C

City

New York

State

NY

Zip Code

11211

FEC ID number of contributing
federal political committee.

Name of Employer
NY Air National Guard

Occupation

Pilot

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16598

B.

Full Name (Last, First, Middle Initial)

FADIMAN JEFFREY

Mailing Address

310 EL GRANADA BLVD

City

HALF MOON BAY

State

CA

Zip Code

94019

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18235

C.

Full Name (Last, First, Middle Initial)

Haley Jeffrey

Mailing Address

930 South 23rd St.

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing
federal political committee.

Name of Employer
Fort Dodge Animal Health

Occupation

Chemist

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13906

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Haley Jeffrey Mailing Address 930 South 23rd St. City State Zip Code Fort Dodge IA 50501 FEC ID number of contributing federal political committee. Name of Employer Fort Dodge Animal Health Occupation Chemist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 270.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 7 Amount of Each Receipt this Period 25.00 CONTRIBUTION Transaction ID: SA17A.14031
B. Full Name (Last, First, Middle Initial) huebner jerold Mailing Address 449 Troutman St #33 City State Zip Code Brooklyn NY 11237 FEC ID number of contributing federal political committee. Name of Employer Simpson, Thacher & Bartlett LLP Occupation paralegal Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 4 / 2 0 0 7 Amount of Each Receipt this Period 75.00 CONTRIBUTION Transaction ID: SA17A.16114
C. Full Name (Last, First, Middle Initial) huebner jerold Mailing Address 449 Troutman St #33 City State Zip Code Brooklyn NY 11237 FEC ID number of contributing federal political committee. Name of Employer Simpson, Thacher & Bartlett LLP Occupation paralegal Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 356.82	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7 Amount of Each Receipt this Period 106.82 CONTRIBUTION Transaction ID: SA17A.15622

SUBTOTAL of Receipts This Page (optional)

206.82

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

huebner jerold

Mailing Address

449 Troutman St #33

City

Brooklyn

State

NY

Zip Code

11237

FEC ID number of contributing
federal political committee.Name of Employer
Simpson, Thatcher & Bartle-
tt LLPOccupation
paralegal

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

456.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16449

B.

Full Name (Last, First, Middle Initial)

Sanguinetti John

Mailing Address

416 E Ivy

City

Mount Shasta

State

CA

Zip Code

96067

FEC ID number of contributing
federal political committee.Name of Employer
selfOccupation
electrical

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.13669

C.

Full Name (Last, First, Middle Initial)

To John

Mailing Address

913 Oakridge Dr

City

Kingsford

State

MI

Zip Code

49802

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16042

SUBTOTAL of Receipts This Page (optional)

2425.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Duerbeck Jonathan

Mailing Address

3198 W. 6th St.

City

Fayetteville

State

AR

Zip Code

72704

FEC ID number of contributing
federal political committee.Name of Employer
Tulsa Public Schools

Occupation

substitute teacher

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Transaction ID: SA17A.14032

B.

Full Name (Last, First, Middle Initial)

Cassel Jordan

Mailing Address

11069 Crystal Crest Ct

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing
federal political committee.Name of Employer
WaMu

Occupation

Loan Consultant

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14360

C.

Full Name (Last, First, Middle Initial)

Gomez Jorge I.

Mailing Address

21523 Longwood

City

San Antonio

State

TX

Zip Code

78259

FEC ID number of contributing
federal political committee.Name of Employer
USAF

Occupation

Retired Military

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16448

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Lekach joshua

Mailing Address

137 golden beach dr.

City

golden beach

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.Name of Employer
LQD Adrenalina

Occupation

Film Producer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1190.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Amount of Each Receipt this Period

800.00

CONTRIBUTION

Transaction ID: SA17A.15149

B.

Full Name (Last, First, Middle Initial)

Lekach joshua

Mailing Address

137 golden beach dr.

City

golden beach

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.Name of Employer
LQD Adrenalina

Occupation

Film Producer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

1050.00

CONTRIBUTION

Transaction ID: SA17A.16635

C.

Full Name (Last, First, Middle Initial)

Estes Julie

Mailing Address

8255 Buena Vista Ave

City

Los Molinos

State

CA

Zip Code

96055

FEC ID number of contributing
federal political committee.Name of Employer
none

Occupation

disabled

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14021

SUBTOTAL of Receipts This Page (optional)

1950.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 / 195

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Mitchell Justin Mailing Address 615 2nd St/Graehl City State Zip Code Fairbanks AK 99701 FEC ID number of contributing federal political committee. Name of Employer none Occupation teacher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 236.00	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 1 / 2 0 0 7 Amount of Each Receipt this Period 111.00 CONTRIBUTION Transaction ID: SA17A.15824
B. Full Name (Last, First, Middle Initial) Mitchell Justin Mailing Address 615 2nd St/Graehl City State Zip Code Fairbanks AK 99701 FEC ID number of contributing federal political committee. Name of Employer none Occupation teacher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 286.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.16397
C. Full Name (Last, First, Middle Initial) Mitchell Justin Mailing Address 615 2nd St/Graehl City State Zip Code Fairbanks AK 99701 FEC ID number of contributing federal political committee. Name of Employer none Occupation teacher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 336.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.16692

SUBTOTAL of Receipts This Page (optional)

211.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Sobodash Justin

Mailing Address

909 N. San Vicente Bl., Apartment

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing
federal political committee.Name of Employer
Baker & Hostetler

Occupation

LLP/Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16459

B.

Full Name (Last, First, Middle Initial)

Clark Kathleen

Mailing Address

2346 1/2 Walton Way

City

Augusta

State

GA

Zip Code

30904

FEC ID number of contributing
federal political committee.Name of Employer
Medical College of Georgia

Occupation

Assitant Professor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14636

C.

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing
federal political committee.Name of Employer
Viet Hung Paris

Occupation

managerial

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14701

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing
federal political committee.Name of Employer
Viet Hung ParisOccupation
managerial

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13661

B.

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing
federal political committee.Name of Employer
Viet Hung ParisOccupation
managerial

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13992

C.

Full Name (Last, First, Middle Initial)

Malmquist Kris

Mailing Address

46 Birkdell Drive

City

Russellville

State

AL

Zip Code

35654

FEC ID number of contributing
federal political committee.Name of Employer
North Alabama Radiopharma-
cyOccupation
Nuclear Pharmacist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16357

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Goul Lanita

Mailing Address

4407 SE Maryland Ave

City

Topeka

State

KS

Zip Code

66609

FEC ID number of contributing
federal political committee.Name of Employer
Payless ShoeSource

Occupation

Project Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

256.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

56.97

CONTRIBUTION

Transaction ID: SA17A.14033

B.

Full Name (Last, First, Middle Initial)

Kistler Larry

Mailing Address

1641 Prospect Street

City

Belmont

State

CA

Zip Code

94002

FEC ID number of contributing
federal political committee.Name of Employer
VMware

Occupation

Computer Technical Trainer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16358

C.

Full Name (Last, First, Middle Initial)

Ralys Leonard

Mailing Address

26944 Avenida Las Palmas

City

Capistrano Beach

State

CA

Zip Code

92624

FEC ID number of contributing
federal political committee.Name of Employer
Harbor Heating and Air

Occupation

HVAC Installation Tech

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14868

SUBTOTAL of Receipts This Page (optional)

256.97

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Perry Lewis

Mailing Address

54 Barbourtown Road

City

Canton Center

State

CT

Zip Code

06020

FEC ID number of contributing
federal political committee.

Name of Employer
Perry Technology Corporat-
ion

Occupation
Machinist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.16712

B.

Full Name (Last, First, Middle Initial)

ford lori

Mailing Address

148 Kirkland Rd.

City

Silver City

State

NM

Zip Code

88061

FEC ID number of contributing
federal political committee.

Name of Employer
Broad Mind Media, Inc.

Occupation
Media

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Transaction ID: SA17A.13807

C.

Full Name (Last, First, Middle Initial)

ford lori

Mailing Address

148 Kirkland Rd.

City

Silver City

State

NM

Zip Code

88061

FEC ID number of contributing
federal political committee.

Name of Employer
Broad Mind Media, Inc.

Occupation
Media

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.13946

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Cassel Lynne

Mailing Address

7127 Mission Hills dr.

City

Las Vegas

State

NV

Zip Code

89113

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
none

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14363

B.

Full Name (Last, First, Middle Initial)

Mosier Lynne G.

Mailing Address

76 Patrick Way

City

Half Moon Bay

State

CA

Zip Code

94019

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation
SELF

Receipt For:

2008

☐

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16863

C.

Full Name (Last, First, Middle Initial)

Barber Mary

Mailing Address

2839 Chesterfield PI, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.Name of Employer
RTI InternationalOccupation
Scientist

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14725

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Henry Matt			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7	
Mailing Address 19655 E. Mullan Rd				
City	State	Zip Code		
Clinton	MT	59825		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Clinton Elementary School		Occupation Principa	CONTRIBUTION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 450.00	Transaction ID: SA17A.13951	
B. Full Name (Last, First, Middle Initial) Haas Matthew			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 181 East Third Street Apartment 101				
City	State	Zip Code		
Corning	NY	14830		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 50.00	
Name of Employer Corning Community College		Occupation Instructor	CONTRIBUTION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.13589	
C. Full Name (Last, First, Middle Initial) Haas Matthew			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address 181 East Third Street Apartment 101				
City	State	Zip Code		
Corning	NY	14830		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 25.00	
Name of Employer Corning Community College		Occupation Instructor	CONTRIBUTION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 275.00	Transaction ID: SA17A.14984	

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Haas Matthew

Mailing Address

181 East Third Street

Apartment 101

City

State

Zip Code

Corning

NY

14830

FEC ID number of contributing
federal political committee.

Name of Employer
Corning Community College

Occupation
Instructor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

307.12

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

32.12

CONTRIBUTION

Transaction ID: SA17A.13753

B.

Full Name (Last, First, Middle Initial)

Haas Matthew

Mailing Address

181 East Third Street

Apartment 101

City

State

Zip Code

Corning

NY

14830

FEC ID number of contributing
federal political committee.

Name of Employer
Corning Community College

Occupation
Instructor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

322.47

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

15.35

CONTRIBUTION

Transaction ID: SA17A.13907

C.

Full Name (Last, First, Middle Initial)

Ferro Michael

Mailing Address

4281 Knoll Ave

City

State

Zip Code

Oakland

CA

94619

FEC ID number of contributing
federal political committee.

Name of Employer
Community Drug Council

Occupation
Therapist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14389

SUBTOTAL of Receipts This Page (optional)

297.47

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Ferro Michael

Mailing Address

4281 Knoll Ave

City

Oakland

State

CA

Zip Code

94619

FEC ID number of contributing
federal political committee.Name of Employer
Community Drug CouncilOccupation
Therapist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16698

B.

Full Name (Last, First, Middle Initial)

MINDEN MICHAEL

Mailing Address

P.O. BOX 490

City

VADER

State

WA

Zip Code

98593

FEC ID number of contributing
federal political committee.Name of Employer
PRINTING ARTS CENTEROccupation
PRE-PRESS MGER

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16706

C.

Full Name (Last, First, Middle Initial)

Winchell Michael

Mailing Address

196 Monmouth Ave

City

Atlantic Highlands

State

NJ

Zip Code

07716

FEC ID number of contributing
federal political committee.Name of Employer
Decision Capital LLCOccupation
CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14713

SUBTOTAL of Receipts This Page (optional)

2425.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JURIKA MICHELLE

Mailing Address

42 GLEN ALPINE ROAD

City

PIEDMONT

State

CA

Zip Code

94611

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16860

B.

Full Name (Last, First, Middle Initial)

WALDROP MS

Mailing Address

8545 CARMEL VALLEY RD

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Transaction ID: SA17A.14291

C.

Full Name (Last, First, Middle Initial)

Hoagland Nancy

Mailing Address

24654 Rodeo Flat Rd

City

Auburn

State

CA

Zip Code

95602

FEC ID number of contributing
federal political committee.

Name of Employer

none

Occupation

none

Receipt For:

2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1111.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

1111.00

CONTRIBUTION

Transaction ID: SA17A.15875

SUBTOTAL of Receipts This Page (optional)

4411.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

NY NEW YORK FUND RAISER

Mailing Address

NEW YORK

City

NEW YORK

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

614.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Receipt this Period

614.00

CONTRIBUTION

Transaction ID: SA17A.14199

B.

Full Name (Last, First, Middle Initial)

kuc patricia

Mailing Address

222 cookstown-new egypt rd

City

wrightstown

State

NJ

Zip Code

08562

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
none

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16709

C.

Full Name (Last, First, Middle Initial)

Gorlach Paul

Mailing Address

22 Fort Pl.

City

Staten Island

State

NY

Zip Code

10301

FEC ID number of contributing
federal political committee.Name of Employer
selfOccupation
owner hotel/artist

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13958

SUBTOTAL of Receipts This Page (optional)

814.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JENKINS PETER

Mailing Address

8950 MYRTLE DVE

City

DOUGLASVILLE

State

GA

Zip Code

30134

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

952.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.15536

B.

Full Name (Last, First, Middle Initial)

JENKINS PETER

Mailing Address

8950 MYRTLE DVE

City

DOUGLASVILLE

State

GA

Zip Code

30134

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.16308

C.

Full Name (Last, First, Middle Initial)

MELE PETER

Mailing Address

P.O. BOX 533

City

CROWN POINT

State

NY

Zip Code

12928

FEC ID number of contributing
federal political committee.

Name of Employer
SELF

Occupation
ENGINEER

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Transaction ID: SA17A.14165

SUBTOTAL of Receipts This Page (optional)

1154.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wagner Peter Mailing Address 69 Garfield Ave Apt 1 City State Zip Code Easthampton MA 01027 FEC ID number of contributing federal political committee. Name of Employer Prison Policy Initiative Occupation attorney Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7 Amount of Each Receipt this Period 70.00 CONTRIBUTION Transaction ID: SA17A.15340
B. Full Name (Last, First, Middle Initial) Tschang Pin-Seng Mailing Address 883 winona blvd City State Zip Code Rochester NY 14617 FEC ID number of contributing federal political committee. Name of Employer None Occupation engineer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.14656
C. Full Name (Last, First, Middle Initial) HRYCKO RAYMOND Mailing Address 19822 SEMINOLE City State Zip Code REDFORD MI 48240 FEC ID number of contributing federal political committee. Name of Employer CHIBA EIWA HIGH SCHOOL Occupation TEACHER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.14342

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Morse Richard

Mailing Address

3 Fifth St. Apt 2

City

Cambridge

State

MA

Zip Code

02141

FEC ID number of contributing
federal political committee.

Name of Employer
Massachusetts General Hos-
pital

Occupation

Systems Administrator

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15952

B.

Full Name (Last, First, Middle Initial)

Sloat Richard

Mailing Address

223 *th Avenue

City

Iron River

State

MI

Zip Code

49935

FEC ID number of contributing
federal political committee.

Name of Employer
Gary L. Pisoni

Occupation

surveying Technician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

267.73

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

167.73

CONTRIBUTION

Transaction ID: SA17A.16828

C.

Full Name (Last, First, Middle Initial)

Farwell Rick

Mailing Address

3441 N. Calle Largo

City

Tucson

State

AZ

Zip Code

85750

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation

Land Surveyor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

307.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14599

SUBTOTAL of Receipts This Page (optional)

467.73

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Farwell Rick

Mailing Address

3441 N. Calle Largo

City

Tucson

State

AZ

Zip Code

85750

FEC ID number of contributing
federal political committee.Name of Employer
Self

Occupation

Land Surveyor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

332.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	5	/	2	0	0	7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16761

B.

Full Name (Last, First, Middle Initial)

KRAUS ROBERT

Mailing Address

4702 BELMONT DR

City

EMMAUS

State

PA

Zip Code

18049

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14244

C.

Full Name (Last, First, Middle Initial)

LITOWITZ ROBERT

Mailing Address

5500 COLLINS AVE #503

City

MIAMI BEACH

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.Name of Employer
SELF

Occupation

INVENTOR

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14193

SUBTOTAL of Receipts This Page (optional)

2575.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Stephens Robert

Mailing Address

343 Lexington Dr.

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15998

B.

Full Name (Last, First, Middle Initial)

chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	7

Amount of Each Receipt this Period

17.00

CONTRIBUTION

Transaction ID: SA17A.14098

C.

Full Name (Last, First, Middle Initial)

chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	7

Amount of Each Receipt this Period

15.15

CONTRIBUTION

Transaction ID: SA17A.14969

SUBTOTAL of Receipts This Page (optional)

282.15

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	7

Amount of Each Receipt this Period

10.10

CONTRIBUTION

Transaction ID: SA17A.15888

B.

Full Name (Last, First, Middle Initial)

chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

252.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Amount of Each Receipt this Period

15.15

CONTRIBUTION

Transaction ID: SA17A.16699

C.

Full Name (Last, First, Middle Initial)

ANSIN RONALD

Mailing Address

132 LITTLETON RD

City

HARVARD

State

MA

Zip Code

01451

FEC ID number of contributing
federal political committee.Name of Employer
NONEOccupation
RETIRED

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14139

SUBTOTAL of Receipts This Page (optional)

2325.25

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 / 195

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hite Rosemary</p> <p>Mailing Address 77500 South 6th St. Unit #B-18</p> <p>City State Zip Code Cottage Grove OR 97424</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13677</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hite Rosemary</p> <p>Mailing Address 77500 South 6th St. Unit #B-18</p> <p>City State Zip Code Cottage Grove OR 97424</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>650.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14041</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Johnston Sage</p> <p>Mailing Address 5191 Avispa Way</p> <p>City State Zip Code Austin TX 78738</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer 3M</p> <p>Occupation Digitization Lead</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15273</p>

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

WRANGHAM SCOOT

Mailing Address

194 MESA COURT

City

LOUISVILLE

State

CO

Zip Code

80027

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14087

B.

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing
federal political committee.Name of Employer
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13736

C.

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing
federal political committee.Name of Employer
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	1	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13821

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing
federal political committee.

Name of Employer
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16492

B.

Full Name (Last, First, Middle Initial)

Beltz Shawn

Mailing Address

4738 s 6th st

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

Name of Employer
CompuCom Systems

Occupation

SYSTEM ADMINISTRATOR

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15460

C.

Full Name (Last, First, Middle Initial)

Collins Shawn

Mailing Address

302 jillwood drive

City

englewood

State

OH

Zip Code

45322

FEC ID number of contributing
federal political committee.

Name of Employer
miami valley hospital

Occupation

mail clerk

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.16713

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 195

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Bennett Sheila

Mailing Address

2405 Michael Ct

City

West Linn

State

OR

Zip Code

97068

FEC ID number of contributing
federal political committee.

Name of Employer
bpa

Occupation

project management officer

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15732

B.

Full Name (Last, First, Middle Initial)

Bennett Sheila

Mailing Address

2405 Michael Ct

City

West Linn

State

OR

Zip Code

97068

FEC ID number of contributing
federal political committee.

Name of Employer
bpa

Occupation

project management officer

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16329

C.

Full Name (Last, First, Middle Initial)

Hammond Stephen

Mailing Address

P.O. Box 1750

City

Delta Junction

State

AK

Zip Code

99737

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation

Engineer / Owner

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 9 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15338

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Van Landingham Steven

Mailing Address

3721 E Cody Ave

City

Gilbert

State

AZ

Zip Code

85234

FEC ID number of contributing
federal political committee.Name of Employer
US ArmyOccupation
Soldier

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15365

B.

Full Name (Last, First, Middle Initial)

JIM STORK

Mailing Address

1109 E LAS OLAS BLVD

City

FORT LAUDERDALE

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.Name of Employer
self employedOccupation
restaurant owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14141

C.

Full Name (Last, First, Middle Initial)

WRANGHAM THERESA

Mailing Address

194 MESA COURT

City

LOUISVILLE

State

CO

Zip Code

80027

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14089

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Hermann Thomas

Mailing Address

860 Roseway Terrace

City

Port Charlotte

State

FL

Zip Code

33948

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15324

B.

Full Name (Last, First, Middle Initial)

Moran Thomas

Mailing Address

103 Calvin Place

City

Santa Cruz

State

CA

Zip Code

95060

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	7

Amount of Each Receipt this Period

36.87

CONTRIBUTION

Transaction ID: SA17A.15000

C.

Full Name (Last, First, Middle Initial)

Thwaites Thomas

Mailing Address

1113 Centre LaneState College

City

State College

State

PA

Zip Code

16801

FEC ID number of contributing
federal political committee.Name of Employer
NoneOccupation
retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15957

SUBTOTAL of Receipts This Page (optional)

536.87

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ANTON VALERIE

Mailing Address

80 ROSS AVE

City

SAN ANSELMO

State

CA

Zip Code

94960

FEC ID number of contributing
federal political committee.Name of Employer
SELF

Occupation

HOMEMAKER

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14195

B.

Full Name (Last, First, Middle Initial)

Schwarz Walter

Mailing Address

60 Morningside Commons

City

Brattleboro

State

VT

Zip Code

05301

FEC ID number of contributing
federal political committee.Name of Employer
None

Occupation

Retired Activist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.15239

C.

Full Name (Last, First, Middle Initial)

Schwarz Walter

Mailing Address

60 Morningside Commons

City

Brattleboro

State

VT

Zip Code

05301

FEC ID number of contributing
federal political committee.Name of Employer
None

Occupation

Retired Activist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16557

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Gillmore Walter H

Mailing Address

PSC 517, Boc RC

City

FPO AP

State

AP

Zip Code

00000

FEC ID number of contributing
federal political committee.Name of Employer
None

Occupation

Retired USAF

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15758

B.

Full Name (Last, First, Middle Initial)

Gillmore Walter H

Mailing Address

PSC 517, Boc RC

City

FPO AP

State

AP

Zip Code

00000

FEC ID number of contributing
federal political committee.Name of Employer
None

Occupation

Retired USAF

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	7

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Transaction ID: SA17A.16196

C.

Full Name (Last, First, Middle Initial)

Miller Warren

Mailing Address

N7454 Mariner Hills Circle

City

Elkhorn

State

WI

Zip Code

53121

FEC ID number of contributing
federal political committee.Name of Employer
WLM Underhill LLC

Occupation

IT Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15260

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 195

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JURIKA WILLIAM

Mailing Address

42 GLEN ALPINE ROAD

City

PIEDMONT

State

CA

Zip Code

94611

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16858

B.

Full Name (Last, First, Middle Initial)

Taylor William

Mailing Address

1600 15eh ave south

City

birmingham

State

AL

Zip Code

35205

FEC ID number of contributing
federal political committee.Name of Employer
self

Occupation

artist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16230

C.

Full Name (Last, First, Middle Initial)

sterling-kfoury yasmin

Mailing Address

94 upland road

City

winthrop

State

MA

Zip Code

02152

FEC ID number of contributing
federal political committee.Name of Employer
melt

Occupation

image consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16147

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

59655.75

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AirTran Airways <hr/> Mailing Address 1745 Phoenix Blvd Suite 370 <hr/> City Atlanta State GA Zip Code 30349 <hr/> Purpose of Disbursement TRAVEL EXPENSES <hr/> Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; float: right; margin-top: -20px;">Category/ Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.17976 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <small>M</small> <small>M</small> <small>D</small> <small>D</small> <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> </div> <div style="display: flex; justify-content: space-between;"> 1 1 1 3 2 0 0 7 </div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">254.80</div>
B. Full Name (Last, First, Middle Initial) ALASKA AIR <hr/> Mailing Address P.O. Box 24948 <hr/> City SEATTLE State WA Zip Code 98124 <hr/> Purpose of Disbursement TRAVEL EXPENSES <hr/> Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; float: right; margin-top: -20px;">Category/ Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18014 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <small>M</small> <small>M</small> <small>D</small> <small>D</small> <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> </div> <div style="display: flex; justify-content: space-between;"> 1 1 2 0 2 0 0 7 </div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">249.40</div>
C. Full Name (Last, First, Middle Initial) ALLEGIAN AIR <hr/> Mailing Address P.O. Box 33244 <hr/> City LAS VAGAS State NV Zip Code 89128 <hr/> Purpose of Disbursement TRAVEL EXPENSES <hr/> Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; float: right; margin-top: -20px;">Category/ Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18099 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <small>M</small> <small>M</small> <small>D</small> <small>D</small> <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> </div> <div style="display: flex; justify-content: space-between;"> 1 2 0 7 2 0 0 7 </div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">257.90</div>

SUBTOTAL of Disbursements This Page (optional)

762.10

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 75 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.17833 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>141.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.17834 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>141.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.17863 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 8 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>123.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

405.80

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.17898 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>159.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.17899 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>159.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.18003 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 9 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>294.30</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

613.10

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.18082 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>100.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB23.18083 Date of Disbursement
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>5.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.17819 Date of Disbursement
Mailing Address PO Box 731 Rocky	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 0 / 2 0 0 7</div> </div>
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES	<div>4.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

109.50

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.17835 Date of Disbursement																				
Mailing Address PO Box 731 Rocky	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	<table border="1"> <tr> <td colspan="10">117.35</td> </tr> </table>	117.35																			
117.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.17977 Date of Disbursement																				
Mailing Address PO Box 731 Rocky	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	3		2	0	0	7												
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	<table border="1"> <tr> <td colspan="10">4.50</td> </tr> </table>	4.50																			
4.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.17983 Date of Disbursement																				
Mailing Address PO Box 731 Rocky	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	7												
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	<table border="1"> <tr> <td colspan="10">85.66</td> </tr> </table>	85.66																			
85.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

207.51

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.18115 Date of Disbursement																				
Mailing Address PO Box 731 Rocky	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	7												
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	<table border="1"> <tr> <td colspan="10">4.50</td> </tr> </table>	4.50																			
4.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS COLLECTIONS	Transaction ID: SB23.18138 Date of Disbursement																				
Mailing Address PO Box 731 Rocky	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	7												
City HILL State NJ Zip Code 08553	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	<table border="1"> <tr> <td colspan="10">104.19</td> </tr> </table>	104.19																			
104.19																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AMTRAK INTERCITY	Transaction ID: SB23.17886 Date of Disbursement																				
Mailing Address 110 Callahan Drive,	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	7												
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<table border="1"> <tr> <td colspan="10">78.20</td> </tr> </table>	78.20																			
78.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

186.89

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMTRAK INTERCITY	Transaction ID: SB23.17989 Date of Disbursement
Mailing Address 110 Callahan Drive,	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>17.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) APA MUSIC AND PICTURES	Transaction ID: SB23.17966 Date of Disbursement
Mailing Address 948 Thomas Dr	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D6</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Warminster State PA Zip Code 18974	Amount of Each Disbursement this Period
Purpose of Disbursement CONFERENCE RENTAL	<div>7500.21</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) AT&T MOBILITY	Transaction ID: SB23.16887 Date of Disbursement
Mailing Address PO BOX 6463	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D0</div> <div>^D1</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE/INTERNET	<div>97.83</div>
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<div>101 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7615.04

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AT&T MOBILITY	Transaction ID: SB23.18042 Date of Disbursement
Mailing Address PO BOX 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 8 / 2 0 0 7</div> </div>
City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name	Amount of Each Disbursement this Period <div>206.76</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) AUBURN QUAD, INC.	Transaction ID: SB23.18190 Date of Disbursement
Mailing Address P.O. BOX 390728	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 7</div> </div>
City CAMBRIDGE State MA Zip Code 02139 Purpose of Disbursement ACTBLUE CONDUIT PROCESSING FEE Candidate Name	Amount of Each Disbursement this Period <div>31.09</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> <div>101</div>
C. Full Name (Last, First, Middle Initial) AUTHORIZENET CORP	Transaction ID: SB23.17944 Date of Disbursement
Mailing Address 915 SOUTH 500 EAST SUITE 200	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 7</div> </div>
City AMERICAN FORK State UT Zip Code 84003 Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES Candidate Name	Amount of Each Disbursement this Period <div>201.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

438.85

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AUTHORIZENET CORP <hr/> Mailing Address 915 SOUTH 500 EAST SUITE 200 <hr/> City AMERICAN FORK State UT Zip Code 84003 <hr/> Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18074 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>158.60</div>
B. Full Name (Last, First, Middle Initial) BECKY ISAIS <hr/> Mailing Address C/O CAMPAIGN HQ P.O BOX 948 <hr/> City ARLINGTON State VA Zip Code 22216 <hr/> Purpose of Disbursement CONSULTING FOR FUND RAISING <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18030 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 6 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>500.00</div>
C. Full Name (Last, First, Middle Initial) BEST WESTERN <hr/> Mailing Address 20400 N 29TH AVE <hr/> City PHOENIX State AZ Zip Code 85027 <hr/> Purpose of Disbursement TRAVEL EXPENSES <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17938 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>745.56</div>

SUBTOTAL of Disbursements This Page (optional)

1404.16

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SB23.17945 Date of Disbursement																				
Mailing Address 20400 N 29TH AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	7												
City PHOENIX State AZ Zip Code 85027	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>699.03</td> </tr> </table>	699.03																			
699.03																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SB23.18093 Date of Disbursement																				
Mailing Address 20400 N 29TH AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	6		2	0	0	7												
City PHOENIX State AZ Zip Code 85027	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>89.21</td> </tr> </table>	89.21																			
89.21																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SB23.18105 Date of Disbursement																				
Mailing Address 20400 N 29TH AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	7												
City PHOENIX State AZ Zip Code 85027	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>366.23</td> </tr> </table>	366.23																			
366.23																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1154.47

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Petherick Chris	Transaction ID: SB23.17872 Date of Disbursement																				
Mailing Address 16305 Woodville Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	7												
City Brandywine State MD Zip Code 20613	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING CAMPAIGN MAGT	<table border="1"> <tr> <td colspan="10">3729.00</td> </tr> </table>	3729.00																			
3729.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Petherick Chris	Transaction ID: SB23.17956 Date of Disbursement																				
Mailing Address 16305 Woodville Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City Brandywine State MD Zip Code 20613	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING CAMPAIGN MAGT	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Petherick Chris	Transaction ID: SB23.17998 Date of Disbursement																				
Mailing Address 16305 Woodville Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	0	7												
City Brandywine State MD Zip Code 20613	Amount of Each Disbursement this Period																				
Purpose of Disbursement COSULTING CAMPAIGN MAGT	<table border="1"> <tr> <td colspan="10">1749.00</td> </tr> </table>	1749.00																			
1749.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7478.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Petherick Chris	Transaction ID: SB23.18021 Date of Disbursement
Mailing Address 16305 Woodville Rd.	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D3</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Brandywine State MD Zip Code 20613	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING CAMPAIGN MAGT Candidate Name	<div>3749.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Petherick Chris	Transaction ID: SB23.18022 Date of Disbursement
Mailing Address 16305 Woodville Rd.	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D3</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Brandywine State MD Zip Code 20613	Amount of Each Disbursement this Period
Purpose of Disbursement EXPENSE REIMBURSEMENT Candidate Name	<div>307.04</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	Transaction ID: SB23.18084 Date of Disbursement
Mailing Address P.O.BOX 6463	<div> <div>^M1</div> <div>^M2</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE/INTERNET Candidate Name	<div>160.45</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4216.49

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	Transaction ID: SB23.18094 Date of Disbursement
Mailing Address P.O.BOX 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE/INTERNET	<div> <div></div> <div>178.38</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	Transaction ID: SB23.18095 Date of Disbursement
Mailing Address P.O.BOX 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE/INTERNET	<div> <div></div> <div>139.70</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	Transaction ID: SB23.18165 Date of Disbursement
Mailing Address P.O.BOX 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 7 / 2 0 0 7</div> </div>
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>207.88</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

525.96

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN	Transaction ID: SB23.16952 Date of Disbursement																				
Mailing Address 1401 N Taft #625	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	7												
City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 101																					
B. Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN	Transaction ID: SB23.17884 Date of Disbursement																				
Mailing Address 1401 N Taft #625	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	7												
City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 101																					
C. Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN	Transaction ID: SB23.17954 Date of Disbursement																				
Mailing Address 1401 N Taft #625	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 101																					

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625	Transaction ID: SB23.18036 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 7 / 2 0 0 7</div> </div>
City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>1500.00</div> <div>101 Category/Type</div>
B. Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB23.18104 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1500.00</div> <div>101 Category/Type</div>
C. Full Name (Last, First, Middle Initial) COMCAST CABLE Mailing Address P.O. BOX 196 City NEWALK State NJ Zip Code 07101 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB23.17999 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>208.14</div> <div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

3208.14

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
COMCAST OF ALEXANDRIA

Mailing Address 508-D S VAN DON ST

City ALEXANDRIA State VA Zip Code 04612

Purpose of Disbursement
TELEPHONE/INTERNET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17873

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
COMMON MAN

Mailing Address Exit 13 of 1-93

City Concord State NH Zip Code 03301

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17857

Date of Disbursement

10 / 17 / 2007

Amount of Each Disbursement this Period

27.72

C.

Full Name (Last, First, Middle Initial)
COMMON MAN

Mailing Address Exit 13 of 1-93

City Concord State NH Zip Code 03301

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18045

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

57.77

SUBTOTAL of Disbursements This Page (optional)

585.49

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) COMMON MAN	Transaction ID: SB23.18169 Date of Disbursement																				
Mailing Address Exit 13 of 1-93	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	7													
City Concord State NH Zip Code 03301	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>63.43</td> </tr> </table>	63.43																			
63.43																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) CONSTANT CONTACT	Transaction ID: SB23.17894 Date of Disbursement																				
Mailing Address Reservoir Place 1601 Trapelo Road Suite 329	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	4		2	0	7													
City Waltham State MA Zip Code 02451	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>155.00</td> </tr> </table>	155.00																			
155.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) CONSTANT CONTACT	Transaction ID: SB23.18031 Date of Disbursement																				
Mailing Address Reservoir Place 1601 Trapelo Road Suite 329	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	7													
City Waltham State MA Zip Code 02451	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>155.00</td> </tr> </table>	155.00																			
155.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

373.43

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

CONSTANT CONTACT

Mailing Address Reservoir Place 1601 Trapelo Road
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18157

Date of Disbursement

12 / 24 / 2007

Amount of Each Disbursement this Period

125.00

B.

Full Name (Last, First, Middle Initial)

CONTINENTAL AIRLINES INC

Mailing Address 1600 Smith Street

City Houston State TX Zip Code 77002

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17858

Date of Disbursement

10 / 17 / 2007

Amount of Each Disbursement this Period

277.80

C.

Full Name (Last, First, Middle Initial)

CONTINENTAL AIRLINES INC

Mailing Address 1600 Smith Street

City Houston State TX Zip Code 77002

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17926

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

329.80

SUBTOTAL of Disbursements This Page (optional)

732.60

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) CONTINENTAL AIRLINES INC Mailing Address 1600 Smith Street	Transaction ID: SB23.17990 Date of Disbursement <div> <div>11</div> <div>15</div> <div>2007</div> </div>
City Houston State TX Zip Code 77002 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>199.80</div>
B. Full Name (Last, First, Middle Initial) Nelson-VanDette David Mailing Address 202 EAST CASS ST City TAMPA State FL Zip Code 33609 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.17852 Date of Disbursement <div> <div>10</div> <div>16</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>434.45</div>
C. Full Name (Last, First, Middle Initial) Nelson-VanDette David Mailing Address 202 EAST CASS ST City TAMPA State FL Zip Code 33609 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18037 Date of Disbursement <div> <div>11</div> <div>27</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>926.97</div>

SUBTOTAL of Disbursements This Page (optional)

1561.22

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) PETRI DEBORA	Transaction ID: SB23.18149 Date of Disbursement
Mailing Address 761 VIOLET MEADOW ST S	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 0 7</div> </div>
City Tacoma State WA Zip Code 98444	Amount of Each Disbursement this Period
Purpose of Disbursement WEBSITE MANAGEMENT	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DELTA AIR	Transaction ID: SB23.17809 Date of Disbursement
Mailing Address P.O. Box 20532	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 9 / 2 0 0 7</div> </div>
City Atlanta State GA Zip Code 30320	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>773.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) DELTA AIR	Transaction ID: SB23.18211 Date of Disbursement
Mailing Address P.O. Box 20532	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City Atlanta State GA Zip Code 30320	Amount of Each Disbursement this Period
Purpose of Disbursement AIRLINE TICKET REFUND	<div>-773.90</div>
Candidate Name	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) DELTA AIR Mailing Address P.O. Box 20532	Transaction ID: SB23.18046 Date of Disbursement <div> <div>11</div> <div>29</div> <div>2007</div> </div>
City Atlanta State GA Zip Code 30320 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>457.80</div>
B. Full Name (Last, First, Middle Initial) DELTA AIR Mailing Address P.O. Box 20532 City Atlanta State GA Zip Code 30320 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18085 Date of Disbursement <div> <div>12</div> <div>05</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>299.60</div>
C. Full Name (Last, First, Middle Initial) DELTA AIR Mailing Address P.O. Box 20532 City Atlanta State GA Zip Code 30320 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18131 Date of Disbursement <div> <div>12</div> <div>13</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>199.30</div>

SUBTOTAL of Disbursements This Page (optional)

956.70

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) TUCKER DORTHY</p> <p>Mailing Address C/O CAMPAIGN HQ P.O BOX 948</p> <p>City ARLINGTON State VA Zip Code 22216</p> <p>Purpose of Disbursement TENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.17802</p> <p>Date of Disbursement 10 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 1484.37</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ENCORE PRODUCTIONS</p> <p>Mailing Address 5150 S Decatur Blvd</p> <p>City Las Vegas State NV Zip Code 89118</p> <p>Purpose of Disbursement PRINTING AND STATIONARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.18001</p> <p>Date of Disbursement 11 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 1137.60</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Exxon Mobil Corporation</p> <p>Mailing Address PO Box 2180</p> <p>City Houston, State TX Zip Code 77252</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.17875</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 40.55</p>

SUBTOTAL of Disbursements This Page (optional)

2662.52

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17876 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 2 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>96.98</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17887 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>122.44</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17900 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>200.34</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

419.76

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP <hr/> Mailing Address 942 South Shady Grove Road <hr/> <table> <tr> <td>City MEMPHIS</td> <td>State TN</td> <td>Zip Code 38120</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement PRINTING AND STATIONARY</td> <td><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> <td>Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City MEMPHIS	State TN	Zip Code 38120	Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>	Candidate Name	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: SB23.17906 Date of Disbursement <div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div>10 / 26 / 2007</div> <hr/> Amount of Each Disbursement this Period <div>44.31</div>
City MEMPHIS	State TN	Zip Code 38120										
Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>											
Candidate Name	Category/ Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State: District:												
B. Full Name (Last, First, Middle Initial) FEDEX SHOP <hr/> Mailing Address 942 South Shady Grove Road <hr/> <table> <tr> <td>City MEMPHIS</td> <td>State TN</td> <td>Zip Code 38120</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement PRINTING AND STATIONARY</td> <td><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> <td>Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City MEMPHIS	State TN	Zip Code 38120	Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>	Candidate Name	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: SB23.17907 Date of Disbursement <div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div>10 / 26 / 2007</div> <hr/> Amount of Each Disbursement this Period <div>90.00</div>
City MEMPHIS	State TN	Zip Code 38120										
Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>											
Candidate Name	Category/ Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State: District:												
C. Full Name (Last, First, Middle Initial) FEDEX SHOP <hr/> Mailing Address 942 South Shady Grove Road <hr/> <table> <tr> <td>City MEMPHIS</td> <td>State TN</td> <td>Zip Code 38120</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement PRINTING AND STATIONARY</td> <td><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> <td>Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City MEMPHIS	State TN	Zip Code 38120	Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>	Candidate Name	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: SB23.17910 Date of Disbursement <div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div>10 / 29 / 2007</div> <hr/> Amount of Each Disbursement this Period <div>21.09</div>
City MEMPHIS	State TN	Zip Code 38120										
Purpose of Disbursement PRINTING AND STATIONARY	<input type="text"/>											
Candidate Name	Category/ Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State: District:												

SUBTOTAL of Disbursements This Page (optional) ►

155.40

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17911 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>21.09</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17912 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>53.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17927 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>6.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

81.09

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 99 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.17950 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>16.69</td> </tr> </table>	16.69																			
16.69																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18005 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>20.35</td> </tr> </table>	20.35																			
20.35																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18006 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>20.35</td> </tr> </table>	20.35																			
20.35																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

57.39

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18060 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>25.80</td> </tr> </table>	25.80																			
25.80																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18061 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>25.80</td> </tr> </table>	25.80																			
25.80																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18086 Date of Disbursement																				
Mailing Address 942 South Shady Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	7												
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>80.82</td> </tr> </table>	80.82																			
80.82																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

132.42

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18096 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>25.80</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18108 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>21.74</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) FEDEX SHOP	Transaction ID: SB23.18151 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>29.38</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

76.92

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) FOUR POINTS SHERATON	Transaction ID: SB23.17839 Date of Disbursement
Mailing Address 9750 AIRPORT BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City LOS ANGELES State CA Zip Code 90045	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>295.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FOUR POINTS SHERATON	Transaction ID: SB23.17840 Date of Disbursement
Mailing Address 9750 AIRPORT BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City LOS ANGELES State CA Zip Code 90045	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>312.08</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FOUR POINTS SHERATON	Transaction ID: SB23.18110 Date of Disbursement
Mailing Address 9750 AIRPORT BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 7</div> </div>
City LOS ANGELES State CA Zip Code 90045	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>283.39</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

891.36

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

FOUR POINTS SHERATON

Mailing Address 9750 AIRPORT BLVD

City
LOS ANGELES

State
CA

Zip Code
90045

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18132

Date of Disbursement

/ /

Amount of Each Disbursement this Period

178.66

B.

Full Name (Last, First, Middle Initial)

GULF 9180

Mailing Address 9180 Gulf Beach Hwy

City
Pensacola

State
FL

Zip Code
32507

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)

GULF 9180

Mailing Address 9180 Gulf Beach Hwy

City
Pensacola

State
FL

Zip Code
32507

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18154

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.28

SUBTOTAL of Disbursements This Page (optional)

284.94

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

GULF 9180

Mailing Address 9180 Gulf Beach Hwy

City Pensacola State FL Zip Code 32507

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18158

Date of Disbursement

12 / 24 / 2007

Amount of Each Disbursement this Period

29.01

B.

Full Name (Last, First, Middle Initial)

GULF 9180

Mailing Address 9180 Gulf Beach Hwy

City Pensacola State FL Zip Code 32507

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18172

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

33.75

C.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City Portland State ME Zip Code 04104

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17984

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

134.47

SUBTOTAL of Disbursements This Page (optional)

197.23

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO Mailing Address PO BOX 1000	Transaction ID: SB23.18007 Date of Disbursement <div> <div>11</div> <div>19</div> <div>2007</div> </div>
City Portland State ME Zip Code 04104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>93.82</div>
B. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO Mailing Address PO BOX 1000 City Portland State ME Zip Code 04104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18025 Date of Disbursement <div> <div>11</div> <div>23</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>81.38</div>
C. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO Mailing Address PO BOX 1000 City Portland State ME Zip Code 04104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18048 Date of Disbursement <div> <div>11</div> <div>29</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>68.85</div>

SUBTOTAL of Disbursements This Page (optional)

244.05

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18062 Date of Disbursement
Mailing Address PO BOX 1000	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>130.67</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18063 Date of Disbursement
Mailing Address PO BOX 1000	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>130.67</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18097 Date of Disbursement
Mailing Address PO BOX 1000	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>67.28</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

328.62

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18117 Date of Disbursement																				
Mailing Address PO BOX 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	7												
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>57.87</td> </tr> </table>	57.87																			
57.87																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18141 Date of Disbursement																				
Mailing Address PO BOX 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	7		2	0	0	7												
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>93.14</td> </tr> </table>	93.14																			
93.14																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.18159 Date of Disbursement																				
Mailing Address PO BOX 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	4		2	0	0	7												
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>84.80</td> </tr> </table>	84.80																			
84.80																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

235.81

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City
Portland

State
ME

Zip Code
04104

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18173

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

77.72

B.

Full Name (Last, First, Middle Initial)

HOLIDAY INN EXPRESS LAX

Mailing Address 14814 Hawthorne Boulevard

City
Lawndale

State
CA

Zip Code
90260

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17842

Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

104.94

C.

Full Name (Last, First, Middle Initial)

HOLIDAY INN EXPRESS LAX

Mailing Address 14814 Hawthorne Boulevard

City
Lawndale

State
CA

Zip Code
90260

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17843

Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

324.82

SUBTOTAL of Disbursements This Page (optional)

507.48

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) HOLIDAY INN EXPRESS LAX	Transaction ID: SB23.18015 Date of Disbursement																				
Mailing Address 14814 Hawthorne Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	0		2	0	0	7												
City Lawndale State CA Zip Code 90260	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>291.44</td> </tr> </table>	291.44																			
291.44																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) HOLIDAY INN EXPRESS LAX	Transaction ID: SB23.18016 Date of Disbursement																				
Mailing Address 14814 Hawthorne Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	0		2	0	0	7												
City Lawndale State CA Zip Code 90260	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>292.59</td> </tr> </table>	292.59																			
292.59																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) HOLIDAY INN EXPRESS LAX	Transaction ID: SB23.18142 Date of Disbursement																				
Mailing Address 14814 Hawthorne Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	7		2	0	0	7												
City Lawndale State CA Zip Code 90260	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>430.51</td> </tr> </table>	430.51																			
430.51																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1014.54

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) HOLIDAY INNS-BEVER	Transaction ID: SB23.17856 Date of Disbursement
Mailing Address 14814 Hawthorne Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 6 / 2 0 0 7</div> </div>
City State Zip Code Lawndale CA 90260	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>238.01</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) HOTELSCOM	Transaction ID: SB23.17888 Date of Disbursement
Mailing Address 10440 N. Central Expwy Ste. 400	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 7</div> </div>
City State Zip Code Dallas TX 75231	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div>291.57</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.17804 Date of Disbursement
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 4 / 2 0 0 7</div> </div>
City State Zip Code Bowling Green KY 42101	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FEES FOR COMMUNICATIONS	<div>1583.99</div>
Candidate Name	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2113.57

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.17859 Date of Disbursement
Mailing Address 675 Hennessy Way	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Bowling Green State KY Zip Code 42101	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FEES FOR COMMUNICATIONS	<input type="text" value="2000.00"/>
Candidate Name	<input type="text" value="101"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.17947 Date of Disbursement
Mailing Address 675 Hennessy Way	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Bowling Green State KY Zip Code 42101	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FEES FOR COMMUNICATIONS	<input type="text" value="1500.00"/>
Candidate Name	<input type="text" value="101"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.18000 Date of Disbursement
Mailing Address 675 Hennessy Way	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Bowling Green State KY Zip Code 42101	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FEES FOR COMMUNICATIONS	<input type="text" value="1958.96"/>
Candidate Name	<input type="text" value="101"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5458.96

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.18024 Date of Disbursement
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 0 7</div> </div>
City Bowling Green State KY Zip Code 42101	Amount of Each Disbursement this Period
Purpose of Disbursement EXPENSE REIMBURSEMENT	<div>244.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Eleonai Israel	Transaction ID: SB23.18076 Date of Disbursement
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
City Bowling Green State KY Zip Code 42101	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FEES FOR COMMUNICATIONS	<div>1500.00</div>
Candidate Name	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ELLIOT JACOBSON	Transaction ID: SB23.17806 Date of Disbursement
Mailing Address 1101 3RD STREET, SW APT201	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 4 / 2 0 0 7</div> </div>
City WASHINGTON State DC Zip Code 20021	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING FOR MEDIA AND FUNDRAISING	<div>3300.00</div>
Candidate Name	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5044.50

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ELLIOT JACOBSON</p> <p>Mailing Address 1101 3RD STREET, SW APT201</p> <p>City WASHINGTON State DC Zip Code 20021</p> <p>Purpose of Disbursement EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17874</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 534.02</p> <p>101 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ELLIOT JACOBSON</p> <p>Mailing Address 1101 3RD STREET, SW APT201</p> <p>City WASHINGTON State DC Zip Code 20021</p> <p>Purpose of Disbursement CONSULTING FOR MEDIA AND FUNDRAISING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17959</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 3300.00</p> <p>101 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) JET BLUE AIRWAYS CORP</p> <p>Mailing Address 19 Old Kings Hwy S # 23</p> <p>City Darien State CT Zip Code 06820</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17878</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 428.80</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

4262.82

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) JET BLUE AIRWAYS CORP	Transaction ID: SB23.17889 Date of Disbursement																				
Mailing Address 19 Old Kings Hwy S # 23	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	7												
City Darien State CT Zip Code 06820	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">258.80</td> </tr> </table>	258.80																			
258.80																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) JET BLUE AIRWAYS CORP	Transaction ID: SB23.18143 Date of Disbursement																				
Mailing Address 19 Old Kings Hwy S # 23	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	7		2	0	0	7												
City Darien State CT Zip Code 06820	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">189.40</td> </tr> </table>	189.40																			
189.40																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.18051 Date of Disbursement																				
Mailing Address 1435 MONROE ST NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	9		2	0	0	7												
City WASHINGTON State DC Zip Code 20010	Amount of Each Disbursement this Period																				
Purpose of Disbursement EXPENSE REIMBURSEMENT	<table border="1"> <tr> <td colspan="10">267.42</td> </tr> </table>	267.42																			
267.42																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

715.62

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.18052 Date of Disbursement
Mailing Address 1435 MONROE ST NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 9 / 2 0 0 7</div> </div>
City WASHINGTON State DC Zip Code 20010 Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION Candidate Name	Amount of Each Disbursement this Period <div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.18053 Date of Disbursement
Mailing Address 1435 MONROE ST NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 9 / 2 0 0 7</div> </div>
City WASHINGTON State DC Zip Code 20010 Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION Candidate Name	Amount of Each Disbursement this Period <div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.18147 Date of Disbursement
Mailing Address 1435 MONROE ST NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 7</div> </div>
City WASHINGTON State DC Zip Code 20010 Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION Candidate Name	Amount of Each Disbursement this Period <div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ELEANOR JUSTICE Mailing Address 801 CHAUNCEY AVENUE	Transaction ID: SB23.17957 Date of Disbursement <div> <div>11</div> <div>05</div> <div>2007</div> </div>
City BALTIMORE State MD Zip Code 21217 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>150.00</div>
B. Full Name (Last, First, Middle Initial) ELEANOR JUSTICE Mailing Address 801 CHAUNCEY AVENUE City BALTIMORE State MD Zip Code 21217 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.17958 Date of Disbursement <div> <div>11</div> <div>05</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>100.00</div>
C. Full Name (Last, First, Middle Initial) ELEANOR JUSTICE Mailing Address 801 CHAUNCEY AVENUE City BALTIMORE State MD Zip Code 21217 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18107 Date of Disbursement <div> <div>12</div> <div>10</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>400.00</div>

SUBTOTAL of Disbursements This Page (optional)

650.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ELEANOR JUSTICE Mailing Address 801 CHAUNCEY AVENUE	Transaction ID: SB23.18175 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 7</div> </div>
City State Zip Code BALTIMORE MD 21217 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>250.00</div> <div>101 Category/ Type</div>
B. Full Name (Last, First, Middle Initial) KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State Zip Code BRISTOW VA 20136 Purpose of Disbursement CONSULTING FOR ACCOUNTING SERVICES Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB23.17932 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>2000.00</div> <div>101 Category/ Type</div>
C. Full Name (Last, First, Middle Initial) KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State Zip Code BRISTOW VA 20136 Purpose of Disbursement EXPENSE REIMBURSEMENT Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB23.18038 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 7 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>531.51</div> <div><div>Category/ Type</div></div>

SUBTOTAL of Disbursements This Page (optional) ►

2781.51

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) LIST MARKETING INC	Transaction ID: SB23.17865 Date of Disbursement
Mailing Address PO Box 862	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 8 / 2 0 0 7</div> </div>
City FISHERSVILLE State VA Zip Code 24457	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE/INTERNET	<div> <div></div> <div>575.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) M3 PRINTING	Transaction ID: SB23.17914 Date of Disbursement
Mailing Address P.O. Box 31445	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City PHILADELPHIA State PA Zip Code 19147	Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>785.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MEDIA TEMPLE INCORPORATED	Transaction ID: SB23.17979 Date of Disbursement
Mailing Address 8520 National Blvd. Building A	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 3 / 2 0 0 7</div> </div>
City Culver City State CA Zip Code 90232	Amount of Each Disbursement this Period
Purpose of Disbursement MEDIA EXPENSES	<div> <div></div> <div>187.20</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1547.20

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) MEDIA TEMPLE INCORPORATED	Transaction ID: SB23.18118 Date of Disbursement
Mailing Address 8520 National Blvd. Building A	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Culver City State CA Zip Code 90232	Amount of Each Disbursement this Period
Purpose of Disbursement MEDIA EXPENSES	<input type="text" value="60.70"/>
Candidate Name	<input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MISSOURI DEMOCRATIC STATE CTEE	Transaction ID: SB23.18017 Date of Disbursement
Mailing Address 208 Madison Street	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City JEFFERSON CITY State MO Zip Code 65102	Amount of Each Disbursement this Period
Purpose of Disbursement BALLOT ACCESS	<input type="text" value="1000.00"/>
Candidate Name	<input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS	Transaction ID: SB23.16891 Date of Disbursement
Mailing Address One Concourse Pkwy Suite 300	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES	<input type="text" value="406.06"/>
Candidate Name	<input type="text" value="101"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1466.76

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17939

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

179.92

B.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18064

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

319.85

C.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18065

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

319.85

SUBTOTAL of Disbursements This Page (optional)

819.62

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.17985 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>400.10</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.17992 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>395.09</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.17993 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>395.09</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

1190.28

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.17994 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period <div>395.09</div>
Purpose of Disbursement TRAVEL EXPENSES	<div></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.17995 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period <div>395.09</div>
Purpose of Disbursement TRAVEL EXPENSES	<div></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) NWA AIRLINES	Transaction ID: SB23.18212 Date of Disbursement
Mailing Address 12755 State Highway 55	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 7</div> </div>
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period <div>-400.10</div>
Purpose of Disbursement TRAVEL EXPENSES - AIRLINE TICKET REFUND	<div>101</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

390.08

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) OFFICE DEPOT	Transaction ID: SB23.17808 Date of Disbursement																				
Mailing Address Sunnyvale Branch	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	4		2	0	0	7												
City Sunnyvale State CA Zip Code 94089	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>98.75</td> </tr> </table>	98.75																			
98.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) OFFICE DEPOT	Transaction ID: SB23.17869 Date of Disbursement																				
Mailing Address Sunnyvale Branch	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	7												
City Sunnyvale State CA Zip Code 94089	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>1.04</td> </tr> </table>	1.04																			
1.04																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) OFFICE DEPOT	Transaction ID: SB23.17879 Date of Disbursement																				
Mailing Address Sunnyvale Branch	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	7												
City Sunnyvale State CA Zip Code 94089	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>90.31</td> </tr> </table>	90.31																			
90.31																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

190.10

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

OFFICE OF LT GENERAL UTAH

Mailing Address State Capitol, Suite 220

City State Zip Code
SALT LAKE CITY UT 84114

Purpose of Disbursement
BALLOT ACCESS UTAH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17870

Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

ORLANDO VISTA HOTEL

Mailing Address 12490 Apopka Vineland Road

City State Zip Code
ORLANDO FL 32836

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17918

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

114.52

C.

Full Name (Last, First, Middle Initial)

Paypal Inc

Mailing Address 7615 37th Ave

City State Zip Code
Jackson Heights NY 11372

Purpose of Disbursement
PAYPAL MERCHANT PROCESSING FEES

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18191

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

423.00

SUBTOTAL of Disbursements This Page (optional)

1037.52

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) CHRIS PETHRICK	Transaction ID: SB23.16955 Date of Disbursement																				
Mailing Address 16305 WOODVILLE ROAD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	7												
City State Zip Code BRANDYWINE MD 20613 Purpose of Disbursement CONSULTING FOR CAMPAIGN MANAGEMENT Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>7</td><td>2</td><td>9</td><td>.</td><td>0</td><td>0</td> </tr> </table>	3	7	2	9	.	0	0													
3	7	2	9	.	0	0															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	101 Category/ Type																				
B. Full Name (Last, First, Middle Initial) PRIORITY NETWORKS	Transaction ID: SB23.18002 Date of Disbursement																				
Mailing Address 5795 W. Badura Ave. Suite #110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	0	7												
City State Zip Code Las Vegas NV 89118 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>2</td><td>4</td><td>5</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	2	4	5	.	0	0													
1	2	4	5	.	0	0															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Puritan Backroom Restaurant	Transaction ID: SB23.17827 Date of Disbursement																				
Mailing Address 245 Hookset Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	7												
City State Zip Code Manchester NH 03104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>7</td><td>.</td><td>3</td><td>5</td> </tr> </table>	3	7	.	3	5															
3	7	.	3	5																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

5011.35

TOTAL This Period (last page this line number only)

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ELLEN REYNOLDS Mailing Address 7 ROBINSON LANE	Transaction ID: SB23.20491 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 7</div> </div>
City State Zip Code MOUNT PRESENT ME 04660 Purpose of Disbursement RENTAL NEW HEMPSHIRE - SEPT 07 ARREARS Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>800.00</div> <div>101</div> Category/ Type
B. Full Name (Last, First, Middle Initial) ROB RYAN LLC Mailing Address 2654 W HORIZON RIDGE PARKWAY #B5-141 City State Zip Code HENDERSON NV 89052 Purpose of Disbursement DEBT PAYMT. CONSULTING FOR FUND RAISING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18186 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 7 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> <div>101</div> Category/ Type
C. Full Name (Last, First, Middle Initial) APRIL SHARPLEY Mailing Address 3801 TATTERSHALL LANE City State Zip Code AUSTIN TX 78727 Purpose of Disbursement CONSULTING FOR CAMPAIGN COORDINATION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18203 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>2500.00</div> <div>101</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

8300.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) APRIL SHARPLEY	Transaction ID: SB23.17943 Date of Disbursement																				
Mailing Address 3801 TATTERSHALL LANE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	7												
City State Zip Code AUSTIN TX 78727	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING FOR OFFICE COORDINATION Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) APRIL SHARPLEY	Transaction ID: SB23.18116 Date of Disbursement																				
Mailing Address 3801 TATTERSHALL LANE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	7												
City State Zip Code AUSTIN TX 78727	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING FOR OFFICE COORDINATION Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SHERATON OHARE	Transaction ID: SB23.18113 Date of Disbursement																				
Mailing Address 6501 North Mannheim Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	7												
City State Zip Code ROSEMONT IL 60018	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<table border="1"> <tr> <td colspan="10">445.82</td> </tr> </table>	445.82																			
445.82																					
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SUBTOTAL of Disbursements This Page (optional)

5445.82

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SIR SPEEDY PRINTING</p> <p>Mailing Address 4533-2 W SAHARA AVENUE</p> <p>City LAS VEGAS State NV Zip Code 89102</p> <p>Purpose of Disbursement PRINTING AND STATIONARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.17847</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 431.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTH CAROLINA DEM PARTY</p> <p>Mailing Address 1529 Hampton St. Suite 200</p> <p>City COLUMBIA State SC Zip Code 29201</p> <p>Purpose of Disbursement BALLOT ACCESS SC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.17951</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name MIKE GRAVEL FOR PRESIDENT 2008</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.16888</p> <p>Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 122.90</p>

SUBTOTAL of Disbursements This Page (optional)

3053.90

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17812 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>97.40</td> </tr> </table>																				97.40
									97.40												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17813 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>106.40</td> </tr> </table>																				106.40
									106.40												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17814 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>121.40</td> </tr> </table>																				121.40
									121.40												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

325.20

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17815</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 134.40</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17828</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 91.90</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17829</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 124.90</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

351.20

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17830 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 2 / 2 0 0 7</div> </div>
City Lake Havasu City State AZ Zip Code 86403 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>265.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17848 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City Lake Havasu City State AZ Zip Code 86403 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>349.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.18210 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City Lake Havasu City State AZ Zip Code 86403 Purpose of Disbursement AIRLINE TICKET REFUND Candidate Name	Amount of Each Disbursement this Period <div>-124.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>101 Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

490.90

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17902</p> <p>Date of Disbursement 10 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 91.40</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17903</p> <p>Date of Disbursement 10 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 109.40</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17904</p> <p>Date of Disbursement 10 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 143.40</p>

SUBTOTAL of Disbursements This Page (optional)

344.20

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17919</p> <p>Date of Disbursement 10 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 163.40</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17920</p> <p>Date of Disbursement 10 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 199.40</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17940</p> <p>Date of Disbursement 11 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 90.40</p>

SUBTOTAL of Disbursements This Page (optional)

453.20

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17980</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 2.50</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17981</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 2.50</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17986</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 95.90</p>

SUBTOTAL of Disbursements This Page (optional)

100.90

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17987 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D4</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>128.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.17996 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>383.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.18087 Date of Disbursement
Mailing Address 156 Mescal Loop	<div> <div>^M1</div> <div>^M2</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>65.90</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

578.70

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18125</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 106.40</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18126</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 97.40</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 156 Mescal Loop</p> <p>City Lake Havasu City State AZ Zip Code 86403</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18134</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 95.90</p>

SUBTOTAL of Disbursements This Page (optional)

299.70

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement
AIRLINE TICKET REFUND

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.18213

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

-106.40

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement
AIRLINE TICKET REFUND

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.18214

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

-95.90

C.

Full Name (Last, First, Middle Initial)

MCNEIL SPENCER

Mailing Address 10 WALNUT HILL PARK

City Wooburn State MA Zip Code 01801

Purpose of Disbursement
CONSULTING FEE FUNDRAISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.17909

Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

1797.70

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SPIRIT AIR	Transaction ID: SB23.17923 Date of Disbursement
Mailing Address 2800 Executive Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City MIRAMAR State FL Zip Code 33025 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>278.80</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB23.17849 Date of Disbursement
Mailing Address 910 North Glebe Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City Arlington State VA Zip Code 22203 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>150.46</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB23.17967 Date of Disbursement
Mailing Address 910 North Glebe Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 6 / 2 0 0 7</div> </div>
City Arlington State VA Zip Code 22203 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>88.99</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

518.25

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Staples Mailing Address 910 North Glebe Road City Arlington State VA Zip Code 22203 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18170 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 8 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>20.37</div>
B. Full Name (Last, First, Middle Initial) STATE OF NEW HAMPSHIRE Mailing Address State House, Room 204 City CONCORD State NH Zip Code 03301 Purpose of Disbursement BALLOT ACCESS NH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17962 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>
C. Full Name (Last, First, Middle Initial) ST MARKS CHURCH Mailing Address 131 E 10th St at Second Ave City EAST VILLAGE State IA Zip Code 50126 Purpose of Disbursement CONFERENCE RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17930 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>400.00</div>

SUBTOTAL of Disbursements This Page (optional)

1420.37

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SUNOCO</p> <p>Mailing Address 193 Hartford Ave</p> <p>City Bellingham State MA Zip Code 02019</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18163</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 48.10</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SUNOCO</p> <p>Mailing Address 193 Hartford Ave</p> <p>City Bellingham State MA Zip Code 02019</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18167</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 16.57</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SUPER 8 MOTEL</p> <p>Mailing Address 1910 Eighth Avenue Northeast</p> <p>City ABERDEEN State SD Zip Code 57401</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18011</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 109.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

173.67

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

SUPER 8 MOTEL

Mailing Address 1910 Eighth Avenue Northeast

City ABERDEEN State SD Zip Code 57401

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18012

Date of Disbursement

11 / 19 / 2007

Amount of Each Disbursement this Period

163.50

B.

Full Name (Last, First, Middle Initial)

SUPER 8 MOTEL

Mailing Address 1910 Eighth Avenue Northeast

City ABERDEEN State SD Zip Code 57401

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18098

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

313.04

C.

Full Name (Last, First, Middle Initial)

TELENOMICS GROUP

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City ST LOUISE State MO Zip Code 63132

Purpose of Disbursement
DEBT PAYMENT - CONSULTING FOR DB MAGT

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18199

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

3476.54

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
THE DEMOCRATIC PARTY OF ARKANSAS

Mailing Address 1300 W CAPITOL AVE

City State Zip Code
LITTLE ROCK AR 72201

Purpose of Disbursement
BALLOT ACCESS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18018

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Travel City

Mailing Address 1712 N Frazier St

City State Zip Code
Conroe TX 77301

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18177

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.00

C.

Full Name (Last, First, Middle Initial)
TROY ASSOCIATES

Mailing Address 1916 Wilson Boulevard

City State Zip Code
Arlington, VA 22201

Purpose of Disbursement
RENTAL CAMPAIGN HEADQUARTERS

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.16956

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2982.33

SUBTOTAL of Disbursements This Page (optional)

5488.33

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) TROY ASSOCIATES	Transaction ID: SB23.17971 Date of Disbursement																				
Mailing Address 1916 Wilson Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	8		2	0	0	7												
City Arlington, State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement RENTAL CAMPAIGN HEADQUARTERS	<table border="1"> <tr> <td>2982.33</td> </tr> </table>	2982.33																			
2982.33																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) TROY ASSOCIATES	Transaction ID: SB23.18119 Date of Disbursement																				
Mailing Address 1916 Wilson Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	7												
City Arlington, State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement RENTAL CAMPAIGN HEADQUARTERS	<table border="1"> <tr> <td>2982.33</td> </tr> </table>	2982.33																			
2982.33																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) UNITED AIR	Transaction ID: SB23.17831 Date of Disbursement																				
Mailing Address 1 United Sales Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	7												
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>774.81</td> </tr> </table>	774.81																			
774.81																					
Candidate Name	<table border="1"> <tr> <td></td> </tr> </table> Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

6739.47

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 145 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) UNITED AIR	Transaction ID: SB23.18079 Date of Disbursement																				
Mailing Address 1 United Sales Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>525.79</td> </tr> </table>	525.79																			
525.79																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) UNITED AIR	Transaction ID: SB23.18080 Date of Disbursement																				
Mailing Address 1 United Sales Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00																			
20.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) UNITED AIR	Transaction ID: SB23.18168 Date of Disbursement																				
Mailing Address 1 United Sales Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	7		2	0	0	7												
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>476.10</td> </tr> </table>	476.10																			
476.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1021.89

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 146 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) UNITED AIR	Transaction ID: SB23.18178 Date of Disbursement
Mailing Address 1 United Sales Center	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 7</div> </div>
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>179.40</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) UNLIMITED PRINTING	Transaction ID: SB23.18054 Date of Disbursement
Mailing Address 968 Foye Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 9 / 2 0 0 7</div> </div>
City Lafayette State CA Zip Code 94549	Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>541.16</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.17816 Date of Disbursement
Mailing Address 2345 CRYSTAL DVE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 9 / 2 0 0 7</div> </div>
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES	<div> <div></div> <div>279.30</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

999.86

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.17817 Date of Disbursement																				
Mailing Address 2345 CRYSTAL DVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>279.30</td> </tr> </table>																				279.30
									279.30												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.17964 Date of Disbursement																				
Mailing Address 2345 CRYSTAL DVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>405.40</td> </tr> </table>																				405.40
									405.40												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.17997 Date of Disbursement																				
Mailing Address 2345 CRYSTAL DVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	5		2	0	0	7												
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>259.30</td> </tr> </table>																				259.30
									259.30												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

944.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 148 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.18055 Date of Disbursement
Mailing Address 2345 CRYSTAL DVE	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D9</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>625.30</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.18068 Date of Disbursement
Mailing Address 2345 CRYSTAL DVE	<div> <div>^M1</div> <div>^M2</div> <div>/</div> <div>^D0</div> <div>^D3</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>100.00</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB23.18069 Date of Disbursement
Mailing Address 2345 CRYSTAL DVE	<div> <div>^M1</div> <div>^M2</div> <div>/</div> <div>^D0</div> <div>^D3</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City ARLINGTON State VA Zip Code 22227	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	<div>100.00</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

825.30

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

US CELLUAR

Mailing Address 288 ROUTE 101, 1. ST. FLOOR

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
TELEPHONE/INTERNET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18070

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

293.63

B.

Full Name (Last, First, Middle Initial)

US CELLUAR

Mailing Address 288 ROUTE 101, 1. ST. FLOOR

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
TELEPHONE/INTERNET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18071

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

293.63

C.

Full Name (Last, First, Middle Initial)

USPOST ARLINGTON

Mailing Address 1101 Wilson Blvd Arlington,

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18179

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

15.39

SUBTOTAL of Disbursements This Page (optional)

602.65

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 150 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: SB23.17871 Date of Disbursement																				
Mailing Address 4238 Wilson Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	7												
City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>1</td><td>8</td><td>7</td><td>.</td><td>7</td><td>7</td> </tr> </table>	1	8	7	.	7	7														
1	8	7	.	7	7																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: SB23.17933 Date of Disbursement																				
Mailing Address 4238 Wilson Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>7</td><td>0</td><td>3</td><td>.</td><td>5</td><td>0</td> </tr> </table>	7	0	3	.	5	0														
7	0	3	.	5	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: SB23.17941 Date of Disbursement																				
Mailing Address 4238 Wilson Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	7												
City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>4</td><td>8</td><td>8</td><td>.</td><td>9</td><td>8</td> </tr> </table>	4	8	8	.	9	8														
4	8	8	.	9	8																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1380.25

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address 4238 Wilson Blvd</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement TELEPHONE/INTERNET</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.18102</p> <p>Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 155.43</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VISTA PRINT USA INC</p> <p>Mailing Address 95 HAYDEN AVENUE</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement PRINTING AND STATIONARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17867</p> <p>Date of Disbursement 10 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 37.86</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VISTA PRINT USA INC</p> <p>Mailing Address 95 HAYDEN AVENUE</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement PRINTING AND STATIONARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17891</p> <p>Date of Disbursement 10 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 28.39</p>

SUBTOTAL of Disbursements This Page (optional)

221.68

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 152 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17818 Date of Disbursement <div> <div>10</div> <div>09</div> <div>2007</div> </div> <hr/> Amount of Each Disbursement this Period <div>58.77</div>
B. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17925 Date of Disbursement <div> <div>10</div> <div>29</div> <div>2007</div> </div> <hr/> Amount of Each Disbursement this Period <div>58.72</div>
C. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17982 Date of Disbursement <div> <div>11</div> <div>13</div> <div>2007</div> </div> <hr/> Amount of Each Disbursement this Period <div>59.22</div>

SUBTOTAL of Disbursements This Page (optional) ►

176.71

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18033 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 6 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>54.46</div>
B. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18114 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>59.22</div>
C. Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18164 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 6 / 2 0 0 7</div> </div> <hr/> Amount of Each Disbursement this Period <div>51.11</div>

SUBTOTAL of Disbursements This Page (optional) ►

164.79

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.16899 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES Candidate Name	<table border="1"> <tr> <td colspan="10">214.04</td> </tr> </table>	214.04																			
214.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17820 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES Candidate Name	<table border="1"> <tr> <td colspan="10">38.50</td> </tr> </table>	38.50																			
38.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17934 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES Candidate Name	<table border="1"> <tr> <td colspan="10">71.16</td> </tr> </table>	71.16																			
71.16																					
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SUBTOTAL of Disbursements This Page (optional)

323.70

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17952 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>1381.56</td> </tr> </table>	1381.56																			
1381.56																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17972 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	8		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>70.00</td> </tr> </table>	70.00																			
70.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17975 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	9		2	0	0	7												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>3.00</td> </tr> </table>	3.00																			
3.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1454.56

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.17988 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18013 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18020 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">5.00</td> </tr> </table>	5.00																			
5.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

25.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 157 / 195

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18034 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1.80</td> </tr> </table>																				1.80
									1.80												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18035 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>10.00</td> </tr> </table>																				10.00
									10.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18039 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	7		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	7		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>10.00</td> </tr> </table>																				10.00
									10.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

21.80

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18040 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D7</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18041 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D7</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.24</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18043 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D8</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

30.24

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.18044 Date of Disbursement <div> <div>11</div> <div>28</div> <div>2007</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>10.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18056 Date of Disbursement <div> <div>11</div> <div>30</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18057 Date of Disbursement <div> <div>11</div> <div>30</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>10.00</div>

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18072 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>10.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18073 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>10.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18081 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>1419.56</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1439.56

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.18088 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>10.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18089 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.18090 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>10.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

30.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18091 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18092 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18103 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div>10.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18121 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18122 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18123 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>5.00</td> </tr> </table>	5.00																			
5.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

25.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18124 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>51.88</td> </tr> </table>	51.88																			
51.88																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18128 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>45.00</td> </tr> </table>	45.00																			
45.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18129 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

106.88

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18135 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	3		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18136 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	3		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18137 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	3		2	0	7													
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18146 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 7 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>10.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18155 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 1 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>10.35</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.18171 Date of Disbursement
Mailing Address P.O. Box 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 8 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES	<div> <div></div> <div>10.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

30.35

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) WORLD CAFE LIVE	Transaction ID: SB23.17936 Date of Disbursement																				
Mailing Address 3025 Walnut Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
City Philadelphia State PA Zip Code 19104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>10500.00</td> </tr> </table>	10500.00																			
10500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) WORLD CAFE LIVE	Transaction ID: SB23.17942 Date of Disbursement																				
Mailing Address 3025 Walnut Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	7												
City Philadelphia State PA Zip Code 19104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>117.40</td> </tr> </table>	117.40																			
117.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) ZORGO PRINTING SERVICE INC	Transaction ID: SB23.17821 Date of Disbursement																				
Mailing Address 131 North Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	7												
City Pittston State PA Zip Code 18640 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1436.25</td> </tr> </table>	1436.25																			
1436.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

12053.65

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ZORGO PRINTING SERVICE INC

Mailing Address 131 North Main Street

City
Pittston

State
PA

Zip Code
18640

Purpose of Disbursement
PRINTING AND STATIONARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.17969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1729.00

SUBTOTAL of Disbursements This Page (optional)

1729.00

TOTAL This Period (last page this line number only)

146328.84

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input checked="" type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District: 00

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.18184

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District: 00

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.18185

Date of Disbursement

12 / 21 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

20900.00

Balance Outstanding at Close of This Period

9100.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7D D
2 4Y Y Y Y
2 0 0 6

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

9100.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

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LOANS

FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 7 2 4 2 0 0 6

Date Due

12/31/2008

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

3000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2006

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 173 / 195

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 0D D
2 5Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 1D D
3 0Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

6000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 2D D
1 8Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

806.74

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

806.74

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

181.87

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

181.87

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 179 / 195

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.70

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 3Y Y Y Y
2 0 0 7

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

95.70

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 5Y Y Y Y
2 0 0 7

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1500.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 181 / 195

FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

43.59

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 6Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

43.59

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

787.83

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 3D D
0 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

787.83

TOTALS This Period (last page in this line only) ▶

47615.73

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20419

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20418

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING - FUNDRAISING

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20014

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

7000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 185 / 195

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MINDI IDENNature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
COORDINATION

Mailing Address 149 S. Barrington Ave. #326

City State ZIP Code
LOS ANGELES CA 90049

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19797

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20411

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20412

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

8000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 186 / 195

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18205

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18206

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AFIFA KLOUJNature of Debt (Purpose):
CONSULTING FEES FOR OFFICE
MANAGEMENTMailing Address 1001 3RD STREET SW
#804City State ZIP Code
WASHINGTON DC 20024

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20440

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

6050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20416

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20417

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
mosier lynneNature of Debt (Purpose):
CONSULTING FEES CALIFORNIA
COORDINATOR

Mailing Address 76 patrick way

City State ZIP Code
half moon bay CA 94019

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19793

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) SUBTOTALS This Period This Page (optional).....

11000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
SKYLER MCKINLEYNature of Debt (Purpose):
CONSULTING FOR INFORMATI-
ON TECHNOLOGY

Mailing Address 1815 S. QUEEN WAY

City State ZIP Code
LAKEWOOD CO 80232

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20457

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID NELSON VAN-DETTENature of Debt (Purpose):
CONSULTING FIELD REP FL

Mailing Address 1013 RIDGE ROAD

City State ZIP Code
LARGO FL 33770

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20444

Amount Incurred This Period

525.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18207

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

1) **SUBTOTALS** This Period This Page (optional).....

15525.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20421

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20422

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRIS PETHRICKNature of Debt (Purpose):
CONSULTING FEES FOR CAMPA-
IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City State ZIP Code
BRANDYWINE MD 20613

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20012

Amount Incurred This Period

7498.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

1) **SUBTOTALS** This Period This Page (optional).....

12498.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE MAY
07

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

1200.00

Transaction ID: SD12.20482

Amount Incurred This Period

0.00

Payment This Period

1200.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20485

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20486

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

1) **SUBTOTALS** This Period This Page (optional).....

1600.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDS

Nature of Debt (Purpose):
RENTAL NEW HAMPSHIRE -
PART OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20487

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDS

Nature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20494

Amount Incurred This Period

800.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDS

Nature of Debt (Purpose):
RENTAL NEW HAMPSHIRE- PART
OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20495

Amount Incurred This Period

800.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

1) **SUBTOTALS** This Period This Page (optional).....

1600.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 192 / 195

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20496

Amount Incurred This Period

800.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ROB RYAN LLCNature of Debt (Purpose):
CONSULTING FOR WEBSITE RE-
DESIGNMailing Address 2654 W HORIZON RIDGE PARKWAY
#B5-141City State ZIP Code
HENDERSON NV 89052

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD12.13419

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.13423

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

800.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING CAMPAIGN COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18204

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING DATABASE MAGT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.13420

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18200

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

5500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 TELENOMICS GROUP

 Nature of Debt (Purpose):
 CONSULTING FOR DATABASE
 MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18201

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 TELENOMICS GROUP

 Nature of Debt (Purpose):
 CONSULTING FOR DATABASE
 MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18202

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

6000.00

2) **TOTALS** This Period (last page this line number only).....

75573.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

47615.73

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

123188.73

Image# 29932218519

Form/Schedule: SA17A

FUNDS VIA ACTBLUE

Transaction ID: SA17A.13527
